

2014 Gage Awards

Reference #	7492065
Status	Complete
Name of hospital or health system	Contra Costa Regional Medical Center/Contra Costa Health Services
Name of project	Lesbian, Gay, Bisexual and Transgender Pride Initiative
CEO name	Anna Roth, RN, MPH
CEO approval	Check here to confirm that your CEO approves of this project being submitted for a 2014 Gage Award
Submitter name (first and last)	Joanne Genet, P.A.
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Within which of the two categories does your application best align?	Population Health

<p>1. Provide a brief description of the project. (This section should resemble an abstract for a poster presentation or an abstract for a peer reviewed journal. Include an objective, data sources, study design, findings, and conclusions.)</p>	<p>In 2009, the Contra Costa Health Services (CCHS) and Contra Costa Regional Medical Center (CCRMC) moved to improve cultural competency and access to services for the Lesbian, Gay, Bisexual and Transgender (LGBT) community by developing an LGBT PRIDE Initiative. The PRIDE Initiative goal is to address organizational change by increasing LGBT visibility, improving staff competencies, creating inclusive internal policies and procedures, and including collaboration and input from local LGBT community in program planning activities, policy creation, and other organizational venues for creating change and improving the health of the LGBT community. In 2009, CCHS used available objective data from recent LGBT health research and collected qualitative data in “stories” from LGBT staff, patients and families. Innovative strategies were used to: 1) integrate practices and policies fostering an inclusive environment; 2) improve equal access and quality healthcare; 3) increase awareness, acceptance and respect for LGBT service clients and employees. The CCRMC received the award of national Leader in LGBT Healthcare Equality 2013 by the Human Rights Campaign (HRC). The CCRMC exceeded all of the Core Four criteria to be designation a national LEADER. Organizational change is slow, however, even with limited research on LGBT change is evident. There are updated nondiscrimination, cultural competency and visitation/welcoming policies in the county. Based on feedback from clients, these policies have resulted in an environment of improved, more appropriate and effective care. Brochures with LGBT resources are available on-line and in the hospital and clinics; there are single stall unisex bathrooms identified that can be used by transgender people; staff is more knowledgeable about appropriate health care for this community; visibility was increased through the use of board orders for the County Board of Supervisors helping them to be more knowledgeable about LGBT people in the community. These are small changes with large impact.</p>
<p>1A. Attachment, if applicable (Applicable examples include a peer reviewed journal article, other content published in the literature, or a presentation at a national meeting)</p>	<p>articlecaliforniahealthreport.docx (56k)</p>

2. Describe the methods use in this project. Include where, why, and how the project was accomplished.

Methods for obtaining data- The pride initiative held a "kick-off" meeting with 100 staff. We asked them to write short narratives or stories about LGBT patient experiences. These experiences were analyzed, categorized, and used to develop a mission statement and work plan to improve care for LGBT patients and their families at Contra Costa Health Services. This data showed specific behavioral changes needed and was also used to create a training booklet for staff on appropriate, effective LGBT care.

Although demographic health data on LGBT (including gender identity and gender expression) individuals that is routinely collected by local, state or Federal agencies is not abundant, existing research shows that health inequalities do exist and need to be addressed. We have measured our success in the number of people trained (over one hundred (100) staff trained), inclusive policies developed, and numbers of materials distributed. Successes:

- staff has resources for appropriate community referrals
- The nondiscrimination, visitation/welcoming and cultural competency policies were changed to be more inclusive. Increases visibility of LGBT, and awareness of staff, and welcoming environment.
- We also trained Juvenile probation and jail staff- appropriate care, perceptions
- 1,000 PRIDE brochures developed that highlight LGBT community resources. Related materials are available on the Pride web site: <http://cchealth.org/pride/>.
- "We Embrace Diversity" nondiscrimination poster is up throughout CCHS with more than 500 distributed.
- Trainings on LGBT youth are offered to medical and mental health providers and staff in the juvenile justice system.
- PRIDE Initiative marches with the Director of Health Services in the 2010 San Francisco Pride Parade.
- Senior Leadership in CCHS received LGBT HEI/HRC health training and rainbow sticker for their name tag to show their competency.

3. Describe the results of the project. What data was used to support improvement results?

Research used for this project included

- First Do No Harm, California Report 2013, <http://www.eqca.org/site/apps/nlnet/content2.aspx?c=kuLRJ9MRKrH&b=8492711&ct=12944117>
- Williams Institute, UCLA <http://williamsinstitute.law.ucla.edu/category/research/census-lgbt-demographics-studies/>
- US Health and Human Services, LGBT Report 2001-2013 <http://www.hhs.gov/lgbt/health-objectives-2012.html#2011>

Other data used was the qualitative data collected from the stories (described in previous section)

Since there is no designated project budget, creative, innovative key strategies are used to:

- 1) integrate practices and policies that foster a safe and inclusive environment;
- 2) improve equal access and quality healthcare services; and
- 3) increase awareness, acceptance and respect for LGBT service recipients/clients and employees.

1. Integrating practices and policies– The PRIDE Initiative identified policies that needed to be updated to add more inclusive language covering “sexual orientation, gender identity and gender expression.” Policy change creates protections and a “safe zone” for populations whose familial rights are questioned. Recent inclusive policy changes are the Non-Discrimination and Welcoming/Visitation policies. The Welcoming/visitation policy, for example, creates an inclusive definition of family and assures patients the right to self-identify their family members

2. Improve equal access and quality services – Transgender clients suffer most from discrimination and misunderstanding. The PRIDE Initiative is partnering with community agencies, The Transgender Law Center/Health Access Project, Lyon Martin Clinic and UCSF Center for Excellence in Transgender Care, and Gender Spectrum in order to develop training opportunities for staff that will improve our capacity to deliver patient centered care.

3. Increase awareness, acceptance and respect –CCHS is accountable to the Contra Costa Board of Supervisors. One of the community awareness strategies is to co-sponsor with local LGBT organizations Board of Supervisor resolutions that declared June LGBT PRIDE month and designated November 21st as the International Transgender Day of Remembrance.

The Pride Initiative is opportunistic and watches for strategies that easily integrate LGBT health issues. This includes the single staff bathrooms that only involves changing the sign on the door and makes a huge visible difference to the transgender community and increases visibility in the hospital. By identifying easy successes, it increased visibility and good will from the LGBT community.

The Pride Initiative is part of Contra Costa Health Service, Public Health Division. The key to the success of the LGBT PRIDE Initiative is the dedicated staff from across divisions in Contra Costa Health Services (Public Health, Behavioral Health, Health Services Personnel and Training, African American Health Initiative, Contra Costa Regional Medical Center and Clinics, CCHS Administration, Contra Costa Health Plan) who

	have meet consistently each month. Each staff involved brought knowledge about the complexities of the organization and areas or strategies of possible change. Patients and family members brought invaluable knowledge of needs, barriers, preferences, and ideas for improvement.
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4. Describe what happened as a result of the project. Was the improvement related to the intervention? Can the project be duplicated by other organizations?

This project can be duplicated. This project used existing and collected data to determine gaps and opportunities with an LGBT –“Health- in –All-Policies” approach. We used creative, innovative key strategies to: 1) integrate practices and policies that foster a safe and inclusive environment; 2) improve equal access and quality healthcare services; and 3) increase awareness, acceptance and respect for LGBT service recipients/clients and employees. The follow are examples of implementing these strategies:

Integrating practices and policies to foster a safe and inclusive environment – The PRIDE Initiative looks for policies that could be easily be updated to add more inclusive language particularly the terms “sexual orientation, gender identity and gender expression.” Policy change creates protection for populations whose familial rights may be questioned. Examples of two of these are updating policies for the Welcoming/Visitation and NonDiscrimination.

Improve equal access and quality healthcare services – To continue to improve equal access, we must be able to identify who is already utilizing services. Our Behavior Health Division has begun to conduct a small pilot of intake questions that include data collection for sexual orientation and gender identity. This will provide information on how to ask these questions and related staff training. Again through our Behavioral Health Division, Dr. Caitlin Ryan of the Family Acceptance Project at San Francisco State University provided trainings of LGBT youth health and family acceptance. These trainings provided medical and mental health provider strategies for talking with parents. Through this effort, we are learning how to successfully and effectively collect this data. We expect that this effort will also have a “spread effect”, creating more opportunities in other settings to improve care of LGBT patients and families. We are currently developing a training plan for transgender care with community partners.

Increase awareness, acceptance and respect – The PRIDE Initiative, within CCHS, is part of a county health organization accountable to the Contra Costa Board of Supervisors. One of the awareness strategies of the PRIDE Initiative is to co-sponsor with LGBT organizations in our community, Board of Supervisor resolutions. These resolutions have declared June LGBT PRIDE month and have designated November 21st at International Transgender Day of Remembrance (remembering transgender victims of violence and working toward acceptance and understanding among different communities). The International Transgender Day of Remembrance flag was hung, along with an explanation, in the lobbies of Contra Costa Regional Medical Center and the Public Health Division. Both of these efforts brought the members of our community, LGBT organizations, and County Health Department staff together to create the events that are a positive recognition of LGBT community.

5. Describe how patients, families, and if appropriate, community was included in the work.	<p>Patients, families have been an integral part of the Pride initiative in all of its phases (see descriptions of data collection and projects above). We expect this to continue moving forward. As well, community agencies are included in our work with the Board of Supervisors to increase LGBT visibility and acceptance in the broader community. The proclamations and resolutions are opportunities for community members to tell their stories to their local politicians whose votes and political stance impact community life. It also allows the press to hear these stories. The Pride Initiative has held annual trainings for staff in CCHS. At the most recent event, four community members were invited to tell their stories to our medical staff. Topics covered were mental health, transgender aging, hospitalized children with lesbian parents and a birth experience.</p>
5A. Attachment, if applicable (Applicable attachments include documents created for patients, families, or community members or by them as a result of the project)	pride_brochure.pdf (943k)
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