Practical tips to make your electronic health records more inclusive of 2SLGBTQ people

Rainbow Health Ontario, a program of Sherbourne Health, created this brief guide in response to the many requests we receive for guidance on incorporating sexual orientation and gender identity into intake forms and Electronic Health Records (EHRs). Developing and implementing inclusive EHRs is essential to creating accessible, welcoming clinical settings where 2SLGBTQ patients feel encouraged to participate in their own health care.

Using health records and forms that affirm 2SLGBTQ identities can increase patient confidence and comfort with a provider. This can promote health care access, as avoidance of care is a common barrier for 2SLGBTQ individuals, frequently caused by prior experiences of stigma and discrimination. Records can also enhance quality of care and decrease the likelihood of negative outcomes. Inclusive forms are helpful for sharing relevant information consistently among a care team, resulting in more appropriate screening, assessment, and treatment. Broadly, the practice of inclusive EHRs can serve as a tool for health equity for researchers, who note their efficiency in documenting health disparities and barriers in systems.

We understand that making changes to software can be difficult and the ability to make changes depends both on the flexibility of the software program and access to funds.

We also recognize that words representing different gender identities and sexual orientations continue to evolve. Changes made to an EHR today may not be current in a few years. For instance, the Trevor Project (2019) released a report with over 34,000 2SLGBTQ youth. The participants identified over 100 gender identities, and more than 100 sexual orientations. Additionally, it's important to keep in mind that service users' gender identities and sexual orientations may change over their lifetime. Be sure to visit the additional resources at the end of this document for more information, including on how to create inclusive EHRs specifically for transgender and non-binary patients.

INTAKE FORMS

We recommend that the following suggested fields be included in intake forms, in this order:

1. Legal full name (as appears on OHIP card):

2. Name you go by:

3. Pronouns (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.) wanted to use]

   [include a section here where people can use as many words as they wish]

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.)

   [include a section here where people can use as many words as they wish]

ADDITIONAL TIPS FOR INCLUSIVE RECORDS

It is important that the information collected is kept confidential and used appropriately.

This means that *every* staff member would refer to the patient by the name and pronoun they go by.

It is not enough just to change the EHRs intake form.

Staff must be trained on how to confidently and respectfully ask the questions—if they are typing into the EHR—or how to accurately input the data if the patient is filling out a paper form. If a mistake is made, apologize sincerely once, commit to doing better next time and move on.

You should only collect data that it is essential to providing services.

If there is no medical need to collect the data, then do not collect it. If you are planning to purchase new EMR software, you can request all of your required fields and tailor the software to be inclusive of the diverse patient populations the health care organization serves.

RESOURCES

A.B. et al. (2022) Experiences of Transgender People Reviewing Their Electronic Health Records, a Qualitative Study. Retrieved from **https://pubmed.ncbi.nlm.nih.gov/31258320/**

Burgess et al. (2019). Evolving Sex and Gender in Electronic Health Records. Retrieved from **https://pubmed.ncbi.nlm.nih.gov/31258320/**

Deutsch, M., Buchholz, D. (2015). Electronic Health Records and Transgender Patients-Practical Recommendations for the Collection of Gender Identity Data. Retrieved from **https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4441683/**

Deutsch et al. (2013). Electronic records and the transgender patient: recommendations from the World Professional Transgender Health EMR Working Group. Retrieved from **https://academic.oup.com/jamia/article/20/4/700/2909343**

Grasso et al. (2022). Using sexual orientation and gender identity data in electronic health records to assess for disparities in preventive health screening services. Retrieved from **https://doi.org/10.1016/j.ijmedinf.2020.104245**

Keuroghlian, A.S. Electronic health records as an equity tool for LGBTQIA+ people. Retrieved from **https://doi.org/10.1038/s41591-021-01592-3**

The Trevor Project. (2019). National Survey on LGBTQ Mental Health. New York. New York: The Trevor Project. Retrieved from **https://www.thetrevorproject.org/survey-2019/?section=Methodology**

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