



Transgender Patient Policy

- I. Purpose.** The purpose of this Transgender Patient Policy is to ensure that Kent Hospital, a CNE Affiliate, offers professional, competent, considerate, respectful timely care in a safe environment that fosters the patient’s comfort and dignity, and is free from all forms of abuse and harassment, including abuse or harassment based on gender identity or gender expression.
- II. Scope.** This policy applies to the staff of Kent Hospital at Butler inpatient behavioral health unit.
- III. Definitions.** Terms not already defined in this Policy have the following meanings:
- a) **“CNE Affiliates”** include all CNE hospitals, CNE health care entities, and any other CNE entity that is a direct or indirect subsidiary of CNE.
 - b) A member of the **“Workforce”** includes any individual who provides products to or performs services for Butler Hospital or a CNE Affiliate, whether such individual is an employee (part-time or full-time), per diem or temporary staff, voluntary staff, students, contractor, or agent.
 - c) **“Gender Identity”** is one’s internal, personal sense of gender, which may or may not be the same as one’s gender assigned at birth.
 - d) **“Gender Expression”** is the external manifestation of one’s gender identity and refers to all the external characteristics and behaviors that are socially defined as either masculine, feminine or gender variant, such as dress, haircut, body characteristics, mannerisms, speech patterns or voice, social roles, and social interactions.
 - e) **“Gender-nonconforming”** is any person who does not meet society’s expectations of gender roles.
 - f) **“Transgender”** is an umbrella term used to describe people whose gender identity, one’s inner sense of being male or female, differs from their assigned or presumed sex at birth. Transgender patients generally are admitted to hospitals or visit clinics for the same types of care as other patients, although transgender patients may also enter hospitals for transition-related health services.



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g) **“Transition/Gender Affirmation”** means to undergo a process by which a person changes their physical sex characteristics and/or gender expression to match their inner sense of being male or female. A person may refer to themselves as “in transition” when asked about their gender. The process may include a name change, a change in preferred pronouns, and a change in social gender expression through things such as hair, clothing, and restroom use. It may or may not include hormones and surgery. While transgender individuals often seek some form of medical treatment such as counseling, hormone therapy, electrolysis, and reassignment surgery, a person does not need to undergo any medical procedure to be considered a transgender man or transgender woman. A transgender individual may pursue legal options to change the gender marker that appears on government issued identification, on social security documentation and other legal documents.

IV. Policy. It is the policy of Kent Hospital that all employees treat all patients professionally, compassionately, and respectfully at all times regardless of a patient’s gender identity or gender expression. Medically related treatment and care will be provided to all persons in need without regard to a patient’s gender identity or gender expression.

a) **Patient Non-Discrimination** Kent Hospital provides safe and competent care without discrimination against, or harassment of, any person on the basis of race, color, national origin, sex, sexual orientation, gender identity and/or expression, age, physical or mental ability, language, religion, pregnancy, citizenship, marital or parental status, veteran’s status, ability to pay or other non-medically relevant factor or any other characteristic protected by Federal, State or Local law. This applies to patient admission, treatment, discharge, or other participation in any CNE programs, services, or activities.

b) **Patient Rights**

- i) The patient has the right to competent, considerate, and respectful care in a safe environment that fosters the patient’s comfort and dignity and is free from all forms of abuse and harassment, including abuse or harassment based on gender identity or gender expression.
- ii) Transgender and gender-nonconforming patients have the right to refuse to be examined, observed, or treated by medical students, residents, 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, including psychiatric and psychological care.



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c) Right to Privacy

i) The patient has the right to privacy and confidentiality during medical treatment or other rendering of care within the hospital.

ii) The patient's right to privacy shall be respected to the extent consistent with providing adequate medical care to the patient, and to the extent consistent with the efficient administration of the health care facility.

Nothing in this section shall be construed to preclude discreet discussion of a patient's case or examination by appropriate medical personnel.

iii) The patient's right to privacy and confidentiality shall extend to all records pertaining to the patient's treatment except as otherwise provided by law.

d) Any discussion or documentation of transgender status and transition-related services, any medical history related to transition, and similar information is sensitive medical information and may involve protected health information, and as such would be subject to Butler Hospital and CNE Affiliate administrative, technical, and physical safeguards.

e) Reasonable and appropriate safeguards should be in place to ensure that no protected health information related to transgender status is intentionally or unintentionally disclosed or overheard by physicians, employees, independent contractors, patients, or hospital visitors.

f) Minor children and adolescents

(i) For purposes of this policy, where the patient is a child or adolescent, the rights and responsibilities assigned to the patient shall inherently apply to the parent and/or legal guardian of that patient to the same extent as those rights and responsibilities are defined by law.

g) Staff Rights

(i) Healthcare providers may not treat a patient differently or refuse to provide care solely because of that patient's gender identity or gender expression. ii) A request to be exempt from an aspect of patient care or treatment based on conflicting cultural values, ethnic or religious beliefs will be considered, but an employee may not refuse to participate in the care or treatment of a patient based solely on gender identity or gender expression. In these cases, the CNE Staff Rights Policy will apply.



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V. Procedure.

a) Preferred Name in Use and Pronoun Use

- i) Address and refer to transgender patients with their self-identified gender, using their pronouns and name in use, regardless of the patient's appearance, surgical history, legal name, or sex assigned at birth.
 - (a) Honor the patient's view even where the patient's family members suggest that the patient is of a gender different from that with which the patient self-identifies.
 - (b) Do not use language or tone that a reasonable person would consider demeaning; do not question or invalidate a patient's actual or perceived gender identity or expression.
 - (c) Do 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.
- ii) Determine a transgender patient's pronouns as follows:
 - (a) At no point in care should an assumption regarding pronoun use be made by a care giver.
 - (b) If the patient's gender presentation does not clearly indicate the patient's gender identity, discreetly and politely ask the patient for the patient's preferred pronoun.
 - (c) If the hospital staff member determines the patient's pronouns on the basis of the patient's gender presentation, but is then corrected by the patient, use the pronouns associated with the gender identity verbally expressed by the patient.
- iii) Determine a transgender patient's preferred name as follows:
 - (a) If the patient or patient's family members do not indicate a preferred name in use, discreetly and politely ask the patient for the patient's preferred name in use.
 - (b) Honor the patient's preferred name in use even where the patient's family members suggest or indicate that the patient prefers a name which is different from their legal name.

b) Recording Gender in Electronic Admitting/Registration Records

- i) In the existing "Gender" field in the admitting/registration record, the registrar will record the patient's gender designation (e.g., Male or Female) that appears on the patient's medical insurance record, legal identification, or other source customarily used in admitting/registration.
- ii) Where available, use free form fields to record the patient's gender identity.
- iii) Where



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available, use “nickname,” “alias” or free form fields to record the patient’s name in use and preferred pronouns.

c) Patient Interaction

- i) Only ask a patient about transgender status, sex assigned at birth or transition-related procedures when directly relevant to the patient’s care. When such inquiries are relevant to the patient’s current care needs, the provider should explain to the patient:
 - Why the requested information is relevant to the patient’s care,
 - That the information will be kept confidential, but some disclosures of the information may be permitted or required, and
 - That the patient should consult the hospital’s HIPAA policy for details concerning permitted disclosures of patient information.
- ii) Before observing or participating in a transgender or gender-nonconforming patient’s case discussion, consultation, examination, or treatment for training purposes, trainees should be counseled on the applicable Patient Nondiscrimination policy, the Policy on Transgender Patient Care, and the policy on Patient’s Rights and Responsibilities. In all cases, discussion, consultation, examination and treatment must be conducted discreetly.

d) Room Assignment

- i) Assign transgender patients to rooms based on their self-identified gender unless the patient requests otherwise. This guideline follows 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 hospital records.
- ii) It is acceptable to assign the patient to a room in accordance with his or her gender identity even if the patient’s physical appearance or genitalia differs from other patients who share the same self-identified gender.
- iii) Determine a patient’s self-identified gender prior to assigning the patient a room by reviewing the patient’s admitting/registration record.
 - (a) If it is impossible upon admission to identify a patient’s self-identified gender because he or she is unconscious or incapacitated, then, inferences can be drawn from the patient’s presentation and mode of dress. Physical examination is appropriate only if required for treatment and should not be used to determine gender.



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- (b) The patient's view should be honored even where the patient's family members suggest that the patient is of a gender different from that with which the patient self identifies.
- iv) In concert with the patients clinically relevant psychiatric symptoms and needs, a transgender patient should be assigned to an in-patient room in the following order of priority:
 - (a) If a transgender patient requests 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 honored.
 - (b) If a transgender patient requests a private room and there is one available, the request should be honored.
 - (c) If a transgender patient does not indicate a rooming preference and a private room is available, the private room should be offered to the transgender patient. The offer should be explained to the patient as optional and for the purpose of ensuring the patient's privacy, safety, and comfort.
 - (d) If a private room is not available and the transgender patient does not wish to share a room with a roommate, the transgender patient should be assigned to an empty double room with the second bed blocked.
 - (e) If there is no private room or empty double room available, the patient should be assigned to a room with a patient of the gender with which the transgender patient identifies.
 - (f) If there is no private or empty double room available and a transgender patient does not wish to share a room, other patients may be moved to make a private room available if doing so would not compromise the health or safety of the patient(s) being moved.
 - (g) If there is no private or empty double room available, the transgender patient refuses to share a room and no other patient can safely be moved to make a private room available, the transgender patient should be allowed to remain in the Emergency Department without harassment until a private room becomes available.
- v) No patient will be denied admission if a gender-appropriate bed is not available.
 - (a) 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 nondiscrimination policy, standards and/or law
 - (b) A patient making ongoing complaints should be moved to another room if relocating the patient would be medically appropriate and safe.



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(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, the Nurse Manager or Nursing Supervisor should remedy the situation by relocating the patient's roommate to prevent continued harassment, if relocating the roommate would be medically appropriate and safe.

(i) 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) Consult the Nurse Manager or Nursing Supervisor where there are questions or concerns related to room assignments.

e) Access to Restrooms

- i) All patients, visitors, and staff of CNE and CNE Affiliates may use the restroom that matches their gender identity. Denying an employee access to a common restroom corresponding to the employee's gender identity is sex discrimination under RI Law (RI General Laws, Chapter 11-24, Sections 1, 2, 2.3, 3, 4, 5).
- ii) Transgender and gender-nonconforming patients, visitors and staff should not be asked to show identity documents to gain access to the restroom that is consistent with their gender identity. Patients, visitors, and staff are not required to have undergone or to provide proof of any medical procedure (including gender reassignment surgery) to have access to facilities designated for use by a particular gender.
- iii) 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 or visitors who are harassed in this manner may contact the Director of Quality and Patient Experience or his/her designee.

f) Access to Personal Items that Assist in Gender Expression

- i) Transgender and gender-nonconforming patients may have access to personal items that facilitate gender expression (e.g., clothing, makeup) to the same extent that other patients have access to these items, regardless of gender, unless such items interfere or may interfere with the delivery of care or patient safety.
- ii) Transgender and gender-nonconforming patients may also have access to other personal items that assist in their gender presentation, such as those used in binding, padding, and tucking, unless such items interfere or may interfere with the delivery of care or patient safety.



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iii) Harassment of transgender and gender-nonconforming patients for using these items to assist in their gender presentation in accordance with their gender identity will not be tolerated. Transgender and gender-nonconforming patients who are harassed or who perceive harassment in this manner may contact the Butler Hospital Director of Quality and Patient Experience or his/her designee.

VI. REFERENCES

- a) CNE-PRIV-001, Notice of Privacy Practices
- b) CNE-PRIV-005, Minimum Necessary Access to Protected Health Information
- c) CNE-HR-014 Staff Rights
- d) CNE-HR-023 Policy Prohibiting Harassment
- e) RI General Laws, Chapter 11-24, Sections 1, 2, 2.3, 3, 4, 5



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