



LGBTQ+

Curriculum Toolkit

for Educators of Healthcare Professionals

INSTITUTE FOR PERSON-CENTERED CARE



Table of Contents

Welcome

This toolkit is a guide to assist educators of future health care professionals to integrate person-centered curriculum content in care of LGBTQ+ people. The toolkit was developed under the guidance of the Institute for Person-Centered Care (IPCC) with input from the LGBTQ+ community. The focus of this toolkit is to present materials that can be incorporated into existing health science education programs. The primary goal of this endeavor is to enhance cultural competency of the future healthcare workforce, in particular when caring for members of the LGBTQ+ community.

A Person Centered LGBTQ+ Curriculum Resources Webinar for IPCC including guidance for integration of the resources within this toolkit is available [via this link](#).

Introduction to Institute for Person-Centered Care (IPCC)

The Institute for Person Centered-Care seeks to transform systems of care and delivery of service to one that cultivates a habitat in which we all can thrive!

[St. Ambrose University's Institute for Person-Centered Care \(IPCC\)](#) is leading the conversation on transforming people, organizations and systems approach to the delivery of care. Person-Centered Care (PCC) is a multi-discipline approach to care that is: co-designed, relationship-based, health-focused, accessible, and integrated.

Principles of PCC include:

- ▶ Multi-discipline/inter-professional rather than specialty focused
- ▶ Driven by individual values/preferences with collaborative decision making at its core
- ▶ Accessible
- ▶ Health-focused
- ▶ Integrated
- ▶ Dynamic/relational

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About the Author

Dr. Kathy Andresen (*she/her/hers*) is a nurse educator with decades of public health nursing practice and organizational leadership expertise. She decided to pursue a Master of Public Health (MPH) degree through St. Ambrose University to gain a deeper understanding of health inequity. During this educational experience, she discovered the root cause of LGBTQ+ health inequity in health systems and grew increasingly committed to making a difference. Dr. Andresen recognized that her curriculum expertise as a nurse educator and successful interprofessional curriculum endeavors, coupled with a strong foundational knowledge of public health would provide the optimal opportunity to develop this toolkit. She readily admits that she is not a content expert in LGBTQ+ health care, but is committed to assuring the voice of the LGBTQ+ community is broadly represented in the various education resources that exist.

Dr. Andresen is a full time faculty member at the [University of West Florida](#). Her research interests include health equity and workforce development.

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Valuable inputs were received from Viminda Shafer [The Project of the Quad Cities](#).

Project Overview

This toolkit is focused on creating awareness among educators of future healthcare providers related to person-centered care for LGBTQ+ clients. By providing educators with a wide variety of existing tools to incorporate in their curriculum, they are able to include these concepts in their courses and influence future healthcare provider cultural humility and utilize these tools to meet interprofessional cultural competencies (Ruud, 2018).

Background

Lesbian, Gay, Bisexual and Transgender and Queer (LGBTQ+) populations experience disparities in access to healthcare and report healthcare provider attitudes as a primary barrier to seeking care. In a sentinel report issued in 2003, the Institute of Medicine (IOM, 2003) called for enhanced healthcare provider education to reduce disparities in patient outcomes. The IOM later added a specific recommendation for enhanced education related to LGBTQ+ patient care, indicating a need for healthcare provider education in addressing gaps in care (IOM, 2011).

Enhancing healthcare provider education in the care of LGBTQ+ populations is one intervention that would decrease disparate health outcomes for LGBTQ+ patients (Kates et al., 2018). Several healthcare provider professional organizations have recommended a need for change in health education curriculum and healthcare systems to reduce access disparities experienced by LGBTQ+ patients. The Association of American Medical Colleges (AAMC) recommended the need for system changes in healthcare institutions (AAMC, 2014) and later promoted the need for interprofessional education (AAMC, 2016). The American Medical Association supports best practices for limiting healthcare practice barriers (AMA, 2015). Similarly, the American Nurses Association (ANA, 2018) identified a need to enhance nursing education curriculum to promote awareness for LGBTQ+ while educating nurses. Despite these recommendations, there is lack of evidence to support consistent integration of LGBTQ+ curriculum content in healthcare provider education programs.

Literature Review Summary

An review of existing literature searching PubMed with the terms “LGBT” and “Sexual and Gender Minorities” and “Healthcare” revealed multiple studies from various health disciplines all focused on the need to increase healthcare provider education in care of LGBTQ+ patients. Nursing and Medicine appear most often in the literature, with similar findings suggesting future nurses, physicians and other healthcare providers are not entering the workforce with the knowledge, skills and attitudes to effectively address the needs of LGBTQ+ patients (Lim et al., 2015) (Obdein et al., 2011) (Jenkins et al., 2016) (White et al., 2015) (Rowe et al., 2017) (Sirota, 2013) (Shires et al., 2015).

Several recent systematic reviews support findings from previous studies on the need for enhanced LGBTQ+ content in healthcare provider training (Medina-Mendez et al., 2021) (McCann et al., 2018) (Morris et al., 2019) Hunt et al., 2019). A need to incorporate LGBTQ+ content in nursing curriculum has been well documented but the challenge is how to move the evidence into practice.

There are no existing interprofessional guidelines for educators to include LGBTQ+ content in healthcare provider education curriculum. Education content varies based upon demographics (Bunting et al., 2021). Implementation of IOM (2011) recommendations vary but are largely influenced by geographical location. Studies suggest inclusion of content focused on knowledge, skills and attitudes surrounding sexual and gender minorities should be integrated in existing health curricula and have the greatest impact on reduction of health disparities (West-Livingston et al., 2021) (Cloyes et al., 2020) (Butler et al., 2016). Emerging themes across several literature sources identified the need to explore implicit bias pertaining to healthcare provider’s views on sexual and gender minorities (FitzGerald et al., 2017) (Morris et al., 2019) (Zestcott et al., 2016).

Findings from a systematic review on bias in healthcare personnel suggest training activities and modalities that increase knowledge and comfort level change attitudes about LGBTQ+ patients (Morris et al., 2019). Providing effective strategies that can be readily adopted into medical, nursing and dental school curricula show promise for reducing disparities (Bunting et al., 2019) (Morris et al., 2019) (West-Livingston, 2021).

Toolkit Content

Contents of this toolkit were assembled using a multi-faceted approach. The first step was the previously described literature review that focused on barriers to access for care for LGBTQ+ patients. Through that review process, the following themes emerged across all health disciplines, which served as a basis for prioritizing items in this toolkit (Medina-Mendez et al., 2021) (McCann et al., 2018) (Morris et al., 2019) (Hunt et al., 2019).

- a) Health care provider attitudes, communication and lack of education are the primary barriers that contribute to health disparities in the LGBTQ+ community
- b) Curriculum content in health care profession programs do not consistently prepare graduates for culturally competent care of LGBTQ+ clients
- c) There is no standardized set of cultural competencies that exist for inclusion of LGBTQ+ health care amongst health care programs.
- d) Faculty in health science programs do not integrate content into curriculum due to time constraints as well as conflicting priorities and unfamiliarity with expected content

Interprofessional Cultural Competency/Humility

It is noteworthy that the initial hypothesis for this toolkit was focused on nursing education and the need for enhanced training to reduce LGBTQ+ health disparities (Strong et al., 2014). However, a more extensive review of literature revealed that the lack of curriculum content focused on LGBTQ+ cultural humility is prevalent across multiple health science disciplines (Zestcott et al., 2016). Discipline specific LGBTQ+ content has been developed in various programs, but there is not one universal LGBTQ+ education resource that supports all health disciplines. Therefore, the focus of this toolkit is to provide broad support for multiple healthcare disciplines with the focus on interprofessional cultural communication competencies as a framework for prioritizing person-centered care for the LGBTQ+ community.

The nature of health care professions' education has historically been unilaterally focused, meaning that education is not taking place with other health care professionals. Nurses learn in nursing school, physicians in medical school and that is true for all licensed healthcare professionals. This creates a "silo" effect where curriculum is not developed or delivered with other healthcare professions. In recent years, there has been a growing recognition for interprofessional communication curriculum content for health care providers (Hannan et al, 2017). Educators of healthcare providers are tasked with ensuring the core interprofessional competencies are met. Most health care provider programs include some

common courses that align with these competencies. Common courses amongst health professional curricula may include Communication, Health Assessment, Leadership/Policy, Ethics and Evidence-Based Practice. Appendix A outlines the learning objectives and outcomes for each of these 4 interprofessional competencies. If a program's content is embedded within another course or is a free standing course, these cultural competencies can be met with the materials provided within this toolkit.

Process for Review of Materials

A person-centered framework process for identifying existing educational materials was established and outlined below. In an effort to provide a person-centered approach, this review was based upon the need to have accessible, health focused materials that can be readily integrated into existing curriculum across multiple disciplines. Materials should be updated consistent with best practices and should be dynamic and appeal to a broad audience. Health science programs are delivered face to face, online and asynchronously. Multiple resources that fit in these various contexts were explored.

Selection of Toolkit Resources	
PURPOSE	To identify existing online educational materials that could be used for future healthcare provider education focused on LGBTQ+ cultural competency/humility.
METHOD	Conducted a literature search for online evidence-based programs healthcare provider education focused on LGBTQ+ cultural competency/humility. Excluded those that required a fee or membership in a specific organization or focused on K-12 populations. Excluded those that were offered face to face or synchronously.
REVIEW PROCESS	Each of the resources listed in the following table was reviewed using a Knowledge, Skills, Attitudes (KSA) lens. KSAs are commonly used to establish healthcare provider materials and are useful in determining how content is aligned within curriculum. Brief description, along with pros and cons was added as a way to organize materials for potential inclusion in the IPCC Toolkit.

List of Educational Resources

A list of selected resources that met the above criteria is outlined in Appendix B: Online Curriculum Resources for LGBTQ+ Healthcare Provider Education. This list is not intended to be exhaustive, rather, it represents resources at the time of this review that met the above criteria and could be adapted within health care education settings. These resources have been developed for use in a variety of settings, but not all have been developed to be used within higher education. The resources have been reviewed and organized to permit educators to quickly identify resources that could be integrated within their courses and/or program. While this toolkit focused on readily available online resources at no cost, there are other opportunities for engaging with the LGBTQ+ community through regional organizations that offer guest presentations from content experts. An example of an organization in the Quad Cities Iowa/Illinois region is [The Project of the Quad Cities](#). Individuals are encouraged to seek out local organizations that provide formal educational services for a fee or at no cost as opposed to expecting individual members of the LGBTQ+ community to provide this education.

Appendix B Criteria	Description of Content
ORGANIZATION	Identifies the organization that developed program
TRAINING NAME	Includes hyperlink to the program
YEAR PUBLISHED	Year of published materials, if available
LENGTH OF TRAINING	Provided in minutes; helps to supports curriculum integration
KNOWLEDGE (K)	Supports student learning outcome related to LGBTQ+ knowledge
SKILLS (S)	Supports student learning outcome related to LGBTQ+ skills
ATTITUDE (A)	Supports student learning outcome related to LGBTQ+ attitude
DELIVERY METHOD & DESCRIPTION	Provides a brief summary of materials and how they are organized
PROS & CONS	Provides considerations for utilizing resources within a healthcare provider educational setting

The Online Curriculum Resources for LGBTQ+ Healthcare Provider Education (Appendix B) were compared to multiple published recommendations from LGBTQ+ communication experts as well as reviewed by members of the LGBTQ+ community to ensure the content is relevant.

Recommendations

Dissemination

The primary recommendation for use of this toolkit is widespread dissemination. This resource is available at no cost to reduce barriers for integration. In addition to being placed on the [St. Ambrose University's Institute for Person-Centered Care \(IPCC\)](#) website, an additional resource for educators includes a webinar Person Centered LGBTQ+ Curriculum Resources for integration of the resources within this toolkit and is available [via this link](#). These resources are available at no cost to reduce barriers for integration.

Integration & Evaluation

The integration of toolkit materials within existing healthcare provider education programs will ensure the content is strategically embedded within curriculum. Ideas to assist educators with including the content in a variety of courses are further described in the appendices below.

Additional contents of this toolkit are recommended for integration in health care provider education programs. Appendices below provide more details related to student engagement resources (Appendix C) an evaluation tool for use within the educational program (Appendix D) and an example of toolkit content for course integration (Appendix E).

► **Appendix C: Sample Engagement Resources for LGBTQ+ Healthcare Provider Education**

This table provides educators with links to additional resources that could be used in a variety of courses. These resources are additional resources that have been recommended by content experts to further engage students in the complexity of LGBTQ+ health care. The organization websites with links to materials have been provided, along with suggested activities to engage students in critical analysis of LGBTQ+ health care needs.

► **Appendix D: Evaluating Knowledge, Skills and Attitudes for Health Care Providers Related to LGBTQ+ Education**

One important aspect of education is evaluating the impact of the training. In review of materials for health care educators, there is not one instrument that has been consistently used to measure student knowledge, skills and attitudes regarding LGBTQ+ training. The instrument in Appendix D was developed through adaptation of multiple evaluation sources and tailored to fit the resources presented in this toolkit. It is broad enough to be used with a variety of audiences and can be used as a pre and post activity. Note that there is not a key that accompanies this instrument, it is to be used for educators to identify gaps and opportunities for further content in specific content areas.

► Appendix E: Sample Integration of Toolkit Resources in a Course

A visual example of interprofessional competencies is displayed in this appendix. The resources provided can be interchanged based upon the focus of the course and the delivery method. Evaluation of student learning is exemplified through the use of the evaluation instrument in Appendix D.

Conclusion

As stated previously in this toolkit, recommendations to include LGBTQ+ content in health care provider education have persisted for years (IOM, 2003, IOM, 2011). This toolkit addresses several of the barriers to integration of curriculum content and provides educators with content, structure and resources to incorporate best practices into health education programs (Medina-Mendez et al., 2021) (McCann et al., 2018) (Morris et al., 2019)(Hunt et al., 2019).

Educators can make the best use of this toolkit by reviewing the webinar with other colleagues and identifying how content can be effectively dispersed across multiple courses. This toolkit is the start of healthcare provider cultural humility training and is not intended to be the only content needed to address health disparities. Educators should utilize the framework outlined in Appendix B to assess new and existing materials to determine if they are aligned with course outcomes. Educators should evaluate curriculum content outlined in this toolkit by using the evaluation in Appendix D. Future opportunities for expanded curriculum can occur if data collected supports the need for resources.

Reduction in health disparities experienced by LGBTQ+ communities will happen with system-wide changes. Many policies and procedures that exist within health care systems require extensive revision to create a welcoming environment and one that will reduce inequities (IOM, 2011). As educators of future health care providers, we have a responsibility to support quality improvement by supporting person-centered care in health equity.

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Appendices



APPENDIX A: Interprofessional Cultural Competencies Crosswalk

COMPETENCY DOMAIN	OBJECTIVES	OUTCOMES	POTENTIAL COURSE(S) ALIGNMENT
1	<p>Values/Ethics for Interprofessional Practice Work with individuals of other professions to maintain a climate of mutual respect and shared values.</p>	Develop a trusting relationship with patients, families, and other team members.	<p>Communication Health Assessment Leadership/Policy Ethics Evidence-Based Practice</p>
2	<p>Roles/Responsibilities Use the knowledge of one's own role and those of other professions to appropriately assess and address the healthcare needs of the patients and populations served.</p>	Recognize one's limitations in skills, knowledge, and abilities.	<p>Communication Health Assessment Leadership/Policy Ethics Evidence-Based Practice</p>
3	<p>Interprofessional Communication Communicate with patients, families, communities, and other health professionals in a responsive and responsible manner that supports a team approach to the maintenance of health and the treatment of disease.</p>	Use respectful language appropriate for a given difficult situation, crucial conversation, or interprofessional conflict.	<p>Communication Health Assessment Leadership/Policy Ethics Evidence-Based Practice</p>
4	<p>Teams and Teamwork Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan and deliver patient-/population-centered care that is safe, timely, efficient, effective, and equitable.</p>	Integrate the knowledge and experience of other professions—appropriate to the specific care situation—to inform care decisions, while respecting patient and community values and priorities/preferences for care.	<p>Communication Health Assessment Leadership/Policy Ethics Evidence-Based Practice</p>

APPENDIX B: Online Curriculum Resources for LGBTQ+ Healthcare

ORGANIZATION	TRAINING NAME	YEAR	LENGTH	K	S	A	DELIVERY METHOD/ DESCRIPTION	PROS	CONS
Gay & Lesbian Medical Association	Part 1: Understanding the Health Needs of LGBT People: An Introduction	2013	90 min	▲		▲	Cultural competence webinar series	Can be included in a variety of healthcare provider courses	2013–information is relevant, but could be updated Lecture only No evaluation
Gay & Lesbian Medical Association	Part 2: Creating a Welcoming and Safe Environment for LGBT People and Families	2013	90 min	▲		▲	Cultural competence webinar series	Can be included in a variety of healthcare provider courses	2013–information is relevant, but could be updated Lecture only No evaluation
Gay & Lesbian Medical Association	Part 3: Clinical Skills for the Care of Transgender Individuals	2013	90 min	▲		▲	Cultural competence webinar series	Can be included in a variety of healthcare provider courses	2013–information is relevant, but could be updated Lecture only No evaluation
Lavender Health LGBTQ Resource Center	Basic Learning Activities LGBTQ Awareness	2016	Varies – 30 min to 3 hrs	▲	▲	▲	Case studies, role play, discussion questions and various curriculum ideas for LGBTQ content	Various learning activities with instructions for educators	Not specially related to healthcare and some may be at an elementary level No evaluation
Lavender Health LGBTQ Resource Center	Intermediate Learning Activities: Health Care Applications	2016	Varies – 30 min to 3 hrs	▲	▲	▲	Case studies, role play, discussion questions and various curriculum ideas for LGBTQ content	Various learning activities with instructions for educators. Written at a level for healthcare provider education.	No evaluation

APPENDIX B: Online Curriculum Resources for LGBTQ+ Healthcare – continued

ORGANIZATION	TRAINING NAME	YEAR	LENGTH	K	S	A	DELIVERY METHOD/ DESCRIPTION	PROS	CONS
Lavender Health LGBTQ Resource Center	Advanced Learning Activities: Intersections of Oppression	2016	Varies – 30 min to 3 hrs	▲		▲	Discussion and written assignments based upon various books	Various learning activities with instructions for educators. Written at a level for healthcare provider education.	Activities available at no cost, students must purchase books, which could be a barrier No evaluation
National LGBTQIA+ Health Education Center <i>A Program of the Fenway Institute</i>	Health Care for Transgender Diverse People	2012	1 hr	▲	▲		Asynchronous online Interactive, multi-media modules covering core concepts related to transgender people and communities	Can be included in a variety of healthcare provider courses	No audio No evaluation
New York City Health and Hospitals Corporation	To Treat Me, You have to Know Who I Am	2017	10 min	▲		▲	Video created for healthcare providers depicting LGBTQ patient experiences	Can be included in a variety of healthcare provider courses	Not a stand-alone activity No evaluation
Project Implicit/ Harvard	Implicit Association Test	2011	15-30 min	▲		▲	A self-assessment of implicit bias for various perspectives that lead to inequities, including sexuality and transgender	Provides insight into personal implicit bias and a good introduction to how healthcare providers impact patient care	Not a stand-alone activity No evaluation

APPENDIX B: Online Curriculum Resources for LGBTQ+ Healthcare – continued

ORGANIZATION	TRAINING NAME	YEAR	LENGTH	K	S	A	DELIVERY METHOD/ DESCRIPTION	PROS	CONS
Sexual Orientation Gender Identity Nursing	Sexual Orientation and Gender Identify in Nursing Lessons	2020	20-40 min	▲	▲	▲	Asynchronous online comprehensive program that includes a lecture portion followed by 4 interactive simulations. Instructions for educators are available to integrate materials within their Learning Management System (LMS).	Includes several interactive vignettes A certificate of completion is included Can use individual components as opposed to entire course	Lecture components are lengthy Focused on nursing interactions, not interprofessional Evaluation outline provided, not explicit
University of California San Francisco Center of Excellence for Transgender Health	Acknowledging Gender & Sex	2017	1-2 hr	▲	▲	▲	Asynchronous online Interactive, case studies, short answer reflection	Can be included in a variety of healthcare provider courses	2010 references Requires Flash, so not universally accessible No evaluation
University of California San Francisco Center of Excellence for Transgender Health	Trans 101: Transgender People in Everyday Work and Life!	None listed	1-2 hr	▲		▲	Asynchronous online Seven interactive, multi-media modules covering core concepts related to transgender people and communities	Can be included in a variety of healthcare provider courses	No evaluation

APPENDIX C: Sample Engagement Resources for LGBTQ+ Healthcare

ORGANIZATION	WEBSITE	FOCUS	SAMPLE ENGAGEMENT RESOURCES	POTENTIAL CURRICULUM APPLICATION/STUDENT ENGAGEMENT
Human Rights Campaign	https://www.hrc.org/resources	By inspiring and engaging individuals and communities, the Human Rights Campaign strives to end discrimination against LGBTQ+ people and realize a world that achieves fundamental fairness and equality for all. HRC envisions a world where lesbian, gay, bisexual, transgender and queer people plus community members who use different language to describe identity are ensured equality and embraced as full members of society at home, at work and in every community.	Municipal Equality Index (MEI)	Explore the MEI interactive tool to identify health, safety and economic impact of diversity and inclusion practices.
			Healthcare Equality Index (HEI)	Explore the HEI interactive tool to find healthcare facilities that are evaluated in the Healthcare Equality Index.
Illinois Department of Public Health	LGBTQ Health	People who are lesbian, gay, bisexual, or transgender (LGBT) are members of every community. They include people of all races and ethnicities, all ages, all socioeconomic statuses, and from all parts of the country. The perspectives and needs of LGBT people must be considered in public health efforts to improve the overall health of every person and eliminate health disparities.	Resources & Publications	Explore Fact Sheet for regional data regarding LGBTQ+ health disparities. Have students explore their own state department public health website to identify the presence of LGBTQ+ health information. Reflect on strategies for improvement.
National Coalition Against Domestic Violence (NCADV)	https://ncadv.org/	Our mission is to lead, mobilize and raise our voices to support efforts that demand a change of conditions that lead to domestic violence such as patriarchy, privilege, racism, sexism, and classism. We are dedicated to supporting survivors and holding offenders accountable and supporting advocates.	State-by-State	Explore state specific information on domestic violence and prevention.
			Blog	Explore blog entries and reflect on the lived experience as well as advocacy for domestic violence survivors.

APPENDIX C: Sample Engagement Resources for LGBTQ+ Healthcare – continued

ORGANIZATION	WEBSITE	FOCUS	SAMPLE ENGAGEMENT RESOURCES	POTENTIAL CURRICULUM APPLICATION/STUDENT ENGAGEMENT
Northwest Portland Area Indian Health Board	https://www.npaihb.org/about-us/	Welcome to the Northwest Portland Area Indian Health Board website. You will notice that we are engaged in many areas of Indian health, including legislation, health promotion and disease prevention, as well as data surveillance and research. Our strengths include an active board, talented staff, and a forward thinking organization. We know that there is much work to be done to improve the health status in Indian Country, but we do not shy away from the challenge.	<p>There's Heart Here (~16 min)</p> <p>See me. Stand with me. (~ 9 min)</p>	<p>Review this video. Compare and contrast the healthcare inclusion practices outlined in this video and have students identify strategies for change in their own healthcare settings.</p> <p>Explore the website and learn about Two-Spirit and LGBTQ+ Health.</p> <p>Discussion questions: How does implicit bias impact the healthcare experience? How can you create an affirming healthcare experience?</p>
Northwestern University Institute for Sexual and Gender Minority Health and Wellbeing (ISGMH)	https://isgmh.northwestern.edu/	SGMH has a multifaceted research infrastructure in place to support its diverse research portfolio. This includes a team to assist with research study implementation and data analysis, lab spaces and interview rooms for assessments, community partners to help guide recruitment and research collection, and project managers to help ensure that projects are completed successfully.	<p>Transgender Works: Creating a Transgender-Inclusive Work Place (~5 min)</p>	<p>Review this brief video. Explore the environmental inclusion practices outlined in this video and have students identify strategies for change.</p>
			<p>Current Issues in LGBTQ Health Lecture Series (videos range in length ~60 min)</p>	<p>Review videos and identify research based impacts on LGBTQ+ health disparities.</p>

APPENDIX C: Sample Engagement Resources for LGBTQ+ Healthcare – continued

ORGANIZATION	WEBSITE	FOCUS	SAMPLE ENGAGEMENT RESOURCES	POTENTIAL CURRICULUM APPLICATION/STUDENT ENGAGEMENT
UCLA School of Law Williams Institute	https://williamsinstitute.law.ucla.edu/	The Williams Institute is dedicated to conducting rigorous, independent research on sexual orientation and gender identity law and public policy. The Institute disseminates its research to policymakers, judges, the media, and other stakeholders to ensure that decisions impacting the lives of millions of LGBT people and families are based on data and facts.	LGBT Facts Data Interactives Infographics Survey Measures	Explore, write, debate or present on impact of LGBTQ+ legal implications. Role play various methods of asking sexual orientation identity and gender identify questions

APPENDIX D: Evaluating Knowledge, Skills and Attitudes for Health Care Providers Related to LGBTQ+ Education

	QUESTIONS	AGREE	DISAGREE	NOT SURE
1	Sex and gender have the same meaning			
2	Most healthcare providers assume a patient is heterosexual			
3	LGBTQ+ patients have equal access to healthcare compared to heterosexual patients			
4	Healthcare provider attitudes impact access to care			
5	I am comfortable using the words "lesbian", "gay", "bisexual", and "transgender"			
6	I am comfortable addressing and talking about LGBTQ+ issues in general			
7	I consistently address homophobic behavior/language exhibited by others			
8	I make an effort to use LGBTQ+ -inclusive language in conversation			
9	Healthcare provider training in LGBTQ+ person-centered care impacts quality of care			
10	I ask LGBTQ+ co-workers and patients about their partners/spouses or families just as I ask heterosexual coworkers or clients about their partners/spouses or families			
11	I feel comfortable challenging misinformation about LGBTQ+ perceptions with my colleagues			
12	I would be comfortable if a patient came out to me as LGBTQ+			
13	I make an effort to use a person's preferred gender pronoun and name, even if I previously knew him or her by a different pronoun or name			
14	I am willing to put aside my personal beliefs and provide care for LGBTQ+ patients			
15	I feel adequately prepared to provide culturally competent care to LGBTQ+ patients			

APPENDIX E: Sample Integration of Toolkit Resources in a Course

HCP5309 Healthcare Leadership This course is an online course but these activities could be completed in a face to face course. These activities could be woven into existing course content.

Interprofessional Competency Use the knowledge of one's own role and those of other professions to appropriately assess and address the healthcare needs of the patients and populations served.

MODULES & OBJECTIVES	ACTIVITIES/ ASSESSMENT
<p>Module 1</p> <p>Explore one's own knowledge, skills and attitudes towards sexual and gender minorities. Discuss the impact of implicit bias on access to care.</p>	<p>Pre-Test: Complete the Evaluating Knowledge, Skills and Attitudes for Health Care Providers Related to LGBTQ+ Education Complete the Implicit Association Test</p> <p>Reflection Activity: Reflect on the findings, how do you feel about the results? View video There's Heart Here (~16 minutes)</p> <p>Discussion questions: How does implicit bias impact the healthcare experience? How can you create an affirming healthcare experience? What is Two-Spirit?</p>
<p>Module 2</p> <p>Use the knowledge of one's own role and those of other professions to appropriately assess and address the healthcare needs of the patients and populations served.</p>	<p>Complete Health Care for Transgender Diverse People (1 hour interactive webinar)</p> <p>Action Plan Activity:</p> <ul style="list-style-type: none"> ▶ Identify 3 strategies for implementing the information shared in this webinar ▶ Create an action plan for implanting change ▶ Identify 3 interprofessional colleagues that would be instrumental in supporting this action plan <p>Discussion questions: How does your knowledge, skills and attitudes differ from other colleagues? How can you advocate for the health care needs of patients and populations in your role as a healthcare provider?</p>
<p>Module 3</p> <p>Explore the impact of health inequity on communities and organizations.</p>	<p>Activity: Explore the Healthcare Equality Index (HEI) interactive tool to find healthcare facilities that are evaluated in the Healthcare Equality Index. https://www.hrc.org/resources</p> <p>Activity: Explore the Municipality Database (also known as the Municipal Equality Index) interactive tool to identify health, safety and economic impact of laws and legislation on diversity and inclusion practices. https://www.hrc.org/resources</p> <p>Activity: Review this brief video. Explore the environmental inclusion practices outlined in this video and have students identify strategies for change. Transgender Works: Creating a Transgender-Inclusive Work Place (~5 minutes)</p> <p>Discussion questions: What are the primary barriers for implementing change in healthcare? Compare and contrast the information shared in this module—what action is needed to create change in your workplace? How can you advocate for change as a new professional in your workplace?</p>
<p>Interprofessional Outcome Recognize one's limitations in skills, knowledge, and abilities</p>	<p>Post-Test: Complete the Evaluating Knowledge, Skills and Attitudes for Health Care Providers Related to LGBTQ+ Education</p>