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<th>Standard</th>
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| A thread of **curricular content** covering LGBT health care should be in place for each year of training. | LGBT-related instruction occurs in both of the first two years of UME curriculum, covering such core issues as:  
- Health risks and disparities  
- Clinical care guidelines by LGBT population  
- Sexual & family history-taking  
- Ethics and professionalism  
- Effective communication  
- Special concerns of LGBT youth, seniors, parents, etc.  
In clerkships, ongoing attention is given to LGBT health care via intersessions, “lunch rounds,” faculty talks, online modules, etc. |  |
| The LGBT curricular thread should receive regular **evaluation**. |  
- All LGBT-related sessions are evaluated by participants  
- Overall effectiveness of curricular thread is evaluated regularly |  |
| An in-depth, for-credit **elective** in LGBT health should be developed and supported. | Topics in UME curriculum are explored in depth via an elective with subject-matter experts, patient panels, field visits, etc. |  |
| Admissions procedures should be fair, inclusive, and well-informed vis-a-vis LGBT applicants. | • Admissions materials and mailings are LGBT-inclusive in images presented, references to diversity, resource listings, etc.  
• Admissions events are LGBT-inclusive in groups invited, speakers presented, information provided, etc.  
• All involved in admissions receive annual training familiarizing them with LGBT anti-discrimination law/policy; LGBT people, issues, and terminology; and campus climate and policies related to LGBT students  
• LGBT applicants are invited to self-identify and statistics regarding LGBT applicants/admittees are meaningfully reviewed and discussed annually |
| --- | --- |
| The retention and success of LGBT students should be monitored regularly, with appropriate follow-up. | • All incoming students are permitted to self-identify as LGBT, and all subsequent student data-gathering that requests demographic information includes LGBT status  
• Data on LGBT students’ experiences, satisfaction, and success are regularly reviewed |
| Student well-being efforts and resources, including orientations to the institution, should be inclusive of and knowledgeable about LGBT people and concerns. | ![All professional and volunteer advisers, counselors, and mentors receive LGBT diversity training](image1)

- LGBT people and resources are included in all wellbeing events and materials, including campus welcome/orientation activities, print and online listings of campus/community resources, panels on stress, parenting, etc. |

| Institutional leadership should meet regularly with LGBT students, faculty, and staff for advising and feedback. | ![A standing advisory committee on LGBT issues is established and funded](image2)

- The LGBT advisory committee meets regularly with institutional leadership to review successes and setbacks |

| A paid, professional “point-person” on LGBT issues should be designated and funded. | A professional staff member is hired or assigned, preferably fulltime, as a publicly identified LGBT point-person, responsible (with funding) for curriculum/program development, training, consulting, support for LGBT students and faculty, etc. |
| **Mentoring and networking among LGBT students, faculty, and staff should be maximally supported.** | **A formal LGBT student group exists and receives campus funding on the same basis as similar student groups.**  
**LGBT faculty and staff receive institutional support for networking, mentoring, community service, etc., as needed, on the same basis as similar groups.** |
|---|---|
| **LGBT faculty at every level should receive institutional support to maximize their recruitment, retention, and advancement.** | **LGBT faculty are regularly surveyed to determine their needs and experiences, including concern that being “out” will do career damage.**  
**Faculty recruitment efforts are LGBT-sensitive and inclusive, e.g., search leaders are trained in LGBT anti-discrimination law and policy, applicants have the opportunity to self-identify as LGBT, information is consistently provided about LGBT-related benefits and policies, etc.**  
**Faculty mentoring initiatives always include LGBT people.**  
**Institutional leaders assess and address pay equity for LGBT faculty, LGBT representation in leadership, clustering of LGBT people by specialty, etc.** |
| LGBT students, faculty, and staff should receive equitable treatment in all institutional **benefits and policies.** | The institution has equalized the treatment of LGBT students and employees by:  
- Prohibiting discrimination on the basis of sexual orientation and gender identity and expression  
- Equalizing spousal and same-sex partner health insurance coverage  
- Equalizing spousal and same-sex partner retirement benefits  
- Providing sick and Family Medical leave for care of ill same-sex partner  
- Allowing same-sex-partner access to “family” or “married” housing  
- Providing transgender health insurance coverage |  |
| LGBT educational materials should be developed and distributed to students, faculty, staff, and patients. | A brochure is distributed to all existing and incoming students, faculty, and staff (and displayed in patient areas, as appropriate), providing basic information about LGBT concerns and resources |  |
| Extraordinary accomplishments by and for LGBT individuals should be regularly recognized by institutional leadership. | One or more LGBT leadership award(s) are given annually by campus leadership |  |
LGBT individuals should be consistently included when the institution seeks, promotes, celebrates, or otherwise attends to “diversity.”

| Institutional leaders meet with LGBT students, faculty, and staff to discuss benefits of LGBT diversity |
| LGBT people are included when other diversity elements (such as gender, race, and ethnicity) are mentioned in statements by leadership, campus PR materials, etc. |
| Planning and funding for campus diversity efforts include LGBT people |
| Institutional celebrations of “diversity holidays” include LGBT “holidays” (see below) |

The institution should be aware of and support external organizations involved with LGBT health.

| Institutional leadership and appropriate faculty and staff members are aware of the work of the Gay & Lesbian Medical Association, AMSA’s LGBT People in Medicine, Women in Medicine, and other professional groups for LGBT people in medicine |
| Institutional leaders and appropriate faculty are aware of leading-edge work in LGBT health disparities and cultural competence, including Healthy People 2010 LGBT Companion Document, IOM Lesbian Health report, etc. |
| Student health services should be knowledgeable about LGBT health concerns. | ▪ All student health services staff are trained in LGBT health care and are able to make appropriate referrals  
▪ Intake and history forms allow LGBT students to disclose their partners, gender identity/expression, sexual history, etc. |
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<td>The institution’s library should include key LGBT titles and journals.</td>
<td>Library staff have consulted with LGBT health organizations, students and faculty, and library specialty groups to ensure that comprehensive, up-to-date information is available on LGBT health</td>
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<td>Proactive training in transgender concerns should be provided to relevant faculty and staff members.</td>
<td>Transgender education has been provided proactively to institutional leadership, registrar/records staff, campus security, student counselors, facilities managers, etc.</td>
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**Core extra-curricular LGBT programming includes:**
- National Coming Out Day (October)
- LGBT Health Awareness Week (mid-March)
- Pride Month (June) or Awareness Week (April/May)
- “LGBT 101” talk
- “LGBT Health 101” talk
- “Transgender 101” talk
- “Special topics in LGBT health” series
- “Out” providers panel
- Session discussing “outness” in residency applications