

Completing a Leader Recertification Survey

Congratulations! Since your healthcare facility has earned the designation of LGBTQ+ Healthcare Equality Leader for three or more consecutive surveys, your organization is eligible to complete our new Leader Recertification Survey, our most streamlined survey.

HOW IT WORKS

There are a series of summary tables in almost all criteria sections. These tables display your previous validated responses. You just need to review these tables and then affirm that your organization still has all of those policies and practices in place. If for some reason a policy or practice is no longer in place OR if you have new policies and practices in place that you would like to add, you may simply check that you would like to change your response to that question and then you will just see that particular question(s) in that section of the survey.

Criteria Questions	Previous Validated Response		Change Response	
	Response on File		Do you wish to change your response to this question?	
	Do not change your response in this column. If you wish to change your response, use the column to the right to open the actual question.		No	Yes
Q1a: Healthcare benefits are offered to domestic partners.	<input type="button" value="No"/>		<input checked="" type="radio"/>	<input type="radio"/>
Q1b: The health insurance policy's definition of spouse includes same-sex spouses.	<input type="button" value="Yes"/>		<input checked="" type="radio"/>	<input type="radio"/>
Q1b: The same documentation is required for enrollment of same and different-sex spouses.	<input type="button" value="Yes"/>		<input checked="" type="radio"/>	<input type="radio"/>
Q3: FMLA-equivalent benefits allow employees to take family and medical leave to care for domestic partners as well as the children of a domestic partner, regardless of biological or adoptive status.	<input type="button" value="No"/>		<input checked="" type="radio"/>	<input type="radio"/>
Q4: Bereavement leave policy allows employees to take time off in the event of the death of a domestic partner or their partner's immediate family.	<input type="button" value="Yes"/>		<input checked="" type="radio"/>	<input type="radio"/>
Q5: Organization has at least one health plan available to all employees that explicitly covers medically necessary health services for transgender people, including gender transition-related treatment	<input type="button" value="Yes"/>		<input checked="" type="radio"/>	<input type="radio"/>

WHAT YOU DO HAVE TO COMPLETE

There are a few sections/items that you will have to complete:

- **Survey Contributors** – let us know who has worked on the survey and who should be our primary contact.
- **Organizational Information** – Most of the responses in this section will already be pre-populated based on your previous surveys – please just review the information and complete any blank items.
- **Criteria 1 – Staff Training** – you will have to complete this section as well as meet your on-going training requirement. For this section, you just need to tell us that you intend to complete your on-going training requirement AND you need to upload an example of how you have promoted the HEI free training options to your patient facing staff. **You do not need to have met the on-going training requirement prior to submitting the survey – You have until October 31, 2023 to complete the training requirement.**
- **New & Revised Questions** - There are a number of new or revised questions in this year's survey that you will need to respond to.
- **Any Questions where you change your response** – if you chose to change your response, you will see the question as well as any follow-up questions requesting validating information and you will be required to complete those questions and submit any requested validating information.