**Speaker Notes: Community Organization**

Your Name

Date

Course Number

Course Title

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**Slide 2: Introduction**

The Gay and Lesbian Medical Association (GLMA) is a national membership organization intensely committed to the defense of equal healthcare for lesbian, gay, bisexual, trans, queer, and intersex individuals and to the eradication of prejudice in the field of healthcare. GLMA serves as an association that supports healthcare providers and members of the LGBTQ+ community in eradicating health disparities. It is essential to address ethical and policy problems because the coordination of health for those within the LGBTQ+ populations is essential, as these communities continue to experience discrimination, limited privacy, and difficulties in receiving adequate care (Medina-Martínez et al., 2021). This presentation analyzes the care coordination for LGBTQ+ people in light of critical governmental policies, including the Affordable Care Act (ACA), Health Insurance Portability and Accountability Act (HIPAA), and the Code of Ethics for nurses in health care.

**Slide 3: Governmental Policies Affecting Health and Safety**

The law that guarantees patient's rights and privacy is the Health Insurance Portability and Accountability Act (HIPAA). The inclusion of the LGBTQ+ community poses a significant concern as patients suffer discrimination. Due to its protection of personal health data, HIPAA promotes the patient and healthcare provider relationship by increasing honesty and fostering health services integration. The ACA (Affordable Care Act), as section 1557, prohibits discrimination against sexual and gender minority populations, extending full healthcare rights (White et al., 2020). The provision helps increase equitable health care services concerning the gender identity of the patient to enable them to seek needed treatment without discrimination or denial of their rights to health care services in health care facilities. Generally, the policies promote equality and safety of clients in healthcare facilities.

**Slide 4: Policy Example Impacting the GLMA**

Section 1557 of the ACA has its anti-discrimination clause, which mandates institutions delivering health care to prohibit discrimination of those in need of health care services based on their gender identity or sexual orientation. This provision directly concerns organizations such as the Gay and Lesbian Medical Association because all companies with healthcare providers associated with their organizations must adhere to the guidelines set by the ACA (White et al., 2020). This, under section 1557, has created equality in the health industry since the LGBT community can receive the health care they require without being turned down based on their sexual orientation. To GLMA, this policy fortifies its charge of enhancing the quality of healthcare services by guaranteeing that its affiliate providers adhere to such crucial non-discriminatory standards to advance the community's health, particularly the LGBTQ+.

**Slide 5: Policy Implications for Care Coordination**

Federal policies such as HIPAA and the ACA strongly affect care coordination for individuals. HIPAA guarantees patients' privacy, enhancing the relationship between LGBTQ+ patients and their healthcare givers. This acts as a stimulus for gay patients to offer their physicians crucial information and improves collaboration among different caregivers treating various complaints. The ACA increases the scope of accepting healthcare providers and opens further opportunities for necessary treatments, such as gender-affirming care, to the LGBTQ+ population without risk of discrimination (White et al., 2020). However, the barriers persist in the states that have exemptions for religion, meaning that healthcare practitioners can turn away LGBTQ+ patients simply because of personal beliefs. Those exclusions stifle integration and continuity of care within the patient's health; caring for LGBTQ+ patients becomes cumbersome and challenging due to inadequate and fragmented medical care in every state across the union.

**Slide 6: National, State, and Local Policies Raising Ethical Dilemmas**

The primary federal non-discrimination protection included in the ACA acknowledges the rights of the LGBTQ+ by not allowing discrimination because of the parent's sexual orientation or their child's gender identity. Nevertheless, there are gaps in the properly functioning enforcement, and some people still have no access to proper care. State policies also introduce other ethical concerns through the policy of religious exemptions; every state gives healthcare workers room to neglect the LGBTQ+ community depending on beliefs or religion (Medina-Martínez et al., 2021). These exemptions cause major ethical problems about the right not to be given needed health services. However, local policies and practices differ significantly in that some states provide LGBTQ+ people with adequate protection and healthcare. In contrast, in others, a lack of adequate inclusive healthcare services contributes to disconnection between patient care and geographic location, and the consequences of such disparities remain unresolved.

**Slide 7: Ethical Dilemmas in LGBTQ+ Healthcare**

Ethical issues in the management of LGBTQ+ patients are usually prompted by the question of conscience or principle in that the patient can be denied service by the physician based on the physician's faith. This results in denied care and several hurdles to receiving care. Privacy issues are also an ethical dilemma, for it is essential to respect patients' rights to confidentiality, as mentioned in HIPAA, while treating LGBTQ+ patients (Edemekong et al., 2024). This is particularly relevant for people considering discrimination or prejudice the primary issue. Further, expanded healthcare access is also a problem, as prejudice-based measures, failure to employ non-discrimination protections, religious exemptions, or a scarcity of culturally sensitive healthcare providers that adequately address the unique needs of the population act as barriers to appropriate care coordination and result in the unequal treatment of LGBTQ+ persons.

**Slide 8: Code of Ethics for Nurses**

LGBTQ+ patient care is informed by the essential ethical principles of the Code of Ethics for Nurses, including justice, beneficence, and patient autonomy. Justice guarantees all patients equal treatment concerning medical treatment; on the other hand, beneficence focuses on the principle that promotes the patient's good (Cheraghi et al., 2023). Self-determination or autonomy promotes the patient's choices regarding therapy. Nurses are ethically bound to these principles, an ingredient of the two in advocating against discrimination and guaranteeing equal quality care to LGBTQ+ patients. As some of the care coordination responsibilities, the Code of Ethics directs nurses to act faithfully, embrace cultures, values, and practices that eliminate health disparities, and practice patient-directed care for every person.

**Slide 9: Impact of the Nursing Code of Ethics on Care Coordination**

In eradicating the gap in health care among patients, the Nursing Code of Ethics is quite helpful and sensitive to patients, including the LGBTQ+ population. Through justice and non-discrimination, the code guarantees that nurses at Large are responsive to recognized shortcomings in health- this comprises inequalities in healthcare provision and prejudice in healthcare services. Additionally, the code intends to close gaps related to recognized social factors affecting health, including income, schooling, or sexual orientation of preferred care practitioners(Cheraghi et al., 2023). These factors significantly affect care as those from minority populations experience a lack of resources and access to proper information from healthcare providers. Nurses also playing their part in implementing the standards set out by the Nursing Code of Ethics leads to improved communication about maintaining, promoting, and encouraging the overall health of sexual minorities that encompasses safe, considerate, and culturally sensitive quality patient-centered care.

**Slide 10: Addressing Health Disparities**

As per the framework of Health People 2020, parity also plays a critical role in a health agenda to address and reduce health disparities while increasing access to health care by populations facing systemic marginalization, Minority, and LGBTQ+ populations (Ochiai et al., 2021). A central area of focus is the various health-related social determinants, including income, education level, and culturally appropriate health care, that would determine the future health of these communities. These gaps are closed by nurses and care coordinators through patient-centered care, as well as fighting for policies that would ensure that everyone enjoys equal privileges. For instance, how nurses can favor diverse organizational cultures regarding sexual minority populations and educate other staff members about sexual and gender minority health concerns. One of the essential roles of care coordinators is that they can help manage the patient with the necessary resources, including crucial healthcare providers and mental health services that support the patient. Implementing mechanisms and combating and eliminating barriers to receiving proper services assists healthcare professionals in achieving better favorable outcomes and closing the gap for the LGBTQ+ population.

**Slide 11: Communication and Advocacy**

Some of the critical pressing ethical and policy concerns that relate to care coordination for the LGBTQ+ patient population include lesbian, gay, bisexual, and transexual patient population discrimination in health facilities, privacy, and recognition of competent care. Significant roles in achieving equitable health for the LGBTQ+ community hinge on advocacy to champion policy reforms at health facilities. To garner access to and reform healthcare disparities, practitioners must speak about protecting policies against discrimination related to health disparities and social factors (Medina-Martínez et al., 2021). Groups such as the Gay and lesbian medical association work towards competency and advocacy to increase minority stress reduction and fair treatment of the homosexual population focused on improved patient healthcare. Everyone experiences fair, dignified, competent health care through communication and advocacy.

**Slide 12: Conclusion**

In conclusion, governmental policies such as HIPAA and the ACA channel significant importance to safeguard the privacy interests of involvement of LGBTQ+ patients and non-discriminatory access to health care services. However, work still needs to be done, especially in states with religious exemption laws for service denials. The Nursing Code of Ethics, aligned with the promotion of quality care coordination, should lead to decreased health inequities for LGBTQ+ people. The achievement of favorable ethical and policy opportunities is critical to the improvement of healthcare facilities. Caregivers such as nurses and healthcare workers have the essential and significant task of change agents by supporting changes in policy agendas that are culturally sensitive and egalitarian. If these challenges are successfully met, the LGBTQ patient population will be able to successfully achieve treatment of appropriate quality, competent, and non-stigmatized healthcare services.

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