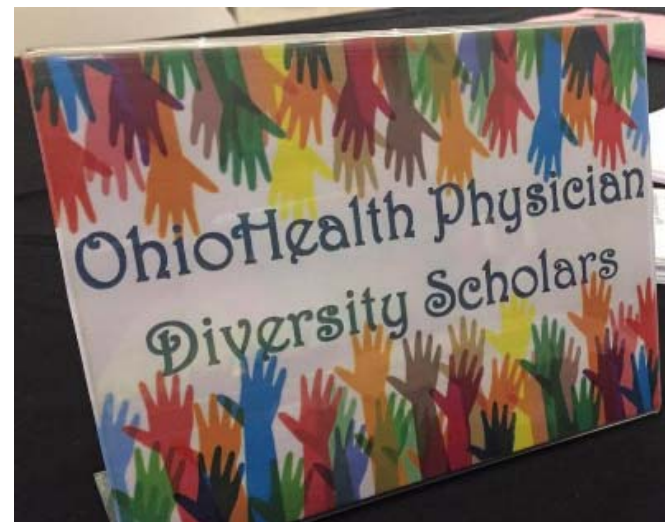


# Recruitment Mentoring

---

## Guiding Underrepresented in Medicine Students into Your Residency Program

Nanette Lacuesta, MD  
Alexandra Blood, DO  
OhioHealth, Columbus, OH  
27 March 2020  
AIAMC Austin, TX



## Disclosures

---

Nanette Lacuesta, MD

I have no actual or potential conflict of interest in relation to this program/presentation.

Alexandra Blood, DO

I have no actual or potential conflict of interest in relation to this program/presentation.

# I wish my teachers knew...

...when I start a rotation at a new clinical site, I look around to see if there are other black students or physicians.

# I wish my teachers knew...

...when I start a new rotation, I wait a few weeks before wearing my natural hair. I have to test out if the learning environment is safe to be myself.

...I've been told my natural hair is unprofessional, and I have to work hard to manage it every morning before work.

# I wish my teachers knew...

...there isn't a day that goes by, that I am not affected by one of these forms of racism [implicit bias, microaggressions].

# I wish my teachers knew...

...I am distracted and overwhelmed by current events in our country.

## Objectives

---

Complete a self-assessment of your programs ethnic and racial diversity, support systems for underrepresented in medicine (URM) learners, and recruiting strategies

Identify gaps in your residency program to recruit and meet the needs of URM learners

Create strategies to recruit URM students into your residency program through mentoring

# Reflection Exercise

What is the diversity of the patient population you serve?

Do the residents in your program reflect the diversity of those you serve?

Do the faculty in your program reflect the diversity of those you serve?





What programs do your local medical schools have in place to support URM students? *an exercise*

What are you doing to recruit URM students into your program?

To recruit URM faculty?

What support systems do you have in place for URM residents?

For Faculty?



## Homework: Where are we now?

---

What % of your residents are diverse?

What % of your faculty are diverse?

What is your state's diversity data for the population?

What is your state's diversity data for physicians?

What is your hospital's diversity data?

What is your hospital system's diversity data?



SEARCH

STUDENTS & RESIDENTS

NEWS & INSIGHTS

DATA & REPORTS

ADVOCACY & POLICY >

PROFESSIONAL DEVELOPMENT >

SERVICES >

WHO WE ARE >

DIVERSITY AND INCLUSION

# Diversity in Medicine: Facts and Figures 2019

## Executive Summary

### Background

This report provides students, medical educators and administrators, researchers, policymakers, the media, and the general public with detailed statistical information about race, ethnicity, and sex in medical education and the physician workforce in the United States. It displays applicant, matriculant, and graduate data for the academic year 2018-2019 and faculty and workforce data for 2018. The data presented are primarily from the AAMC, with additional data from the American Medical Association.

Previously, the AAMC published this report biennially, with the focus alternating between diversity in medical education and diversity in the physician workforce. Beginning in 2019, the AAMC will now combine the two topics and release the report every three years. Previous editions of the report are available at [aamc.org/factsfiguresreports](https://www.aamc.org/factsfiguresreports).

<https://www.aamc.org/data-reports/workforce/report/diversity-medicine-facts-and-figures-2019>



SEARCH

STUDENTS & RESIDENTS

NEWS & INSIGHTS

DATA & REPORTS

ADVOCACY & POLICY

**DIVERSITY IN MEDICINE: FACTS AND FIGURES 2019 EXECUTIVE SUMMARY PDF**

### Explore this report

DIVERSITY IN MEDICINE: FACTS AND FIGURES ...

FOSTERING DIVERSITY AND INCLUSION INTRO

UNDERGRADUATE MEDICAL EDUCATION DATA

U.S. MEDICAL SCHOOL FACULTY DATA

U.S. PHYSICIAN WORKFORCE DATA

ACKNOWLEDGMENTS

Figure 18. Percentage of all active physicians by race/ethnicity, 2018.

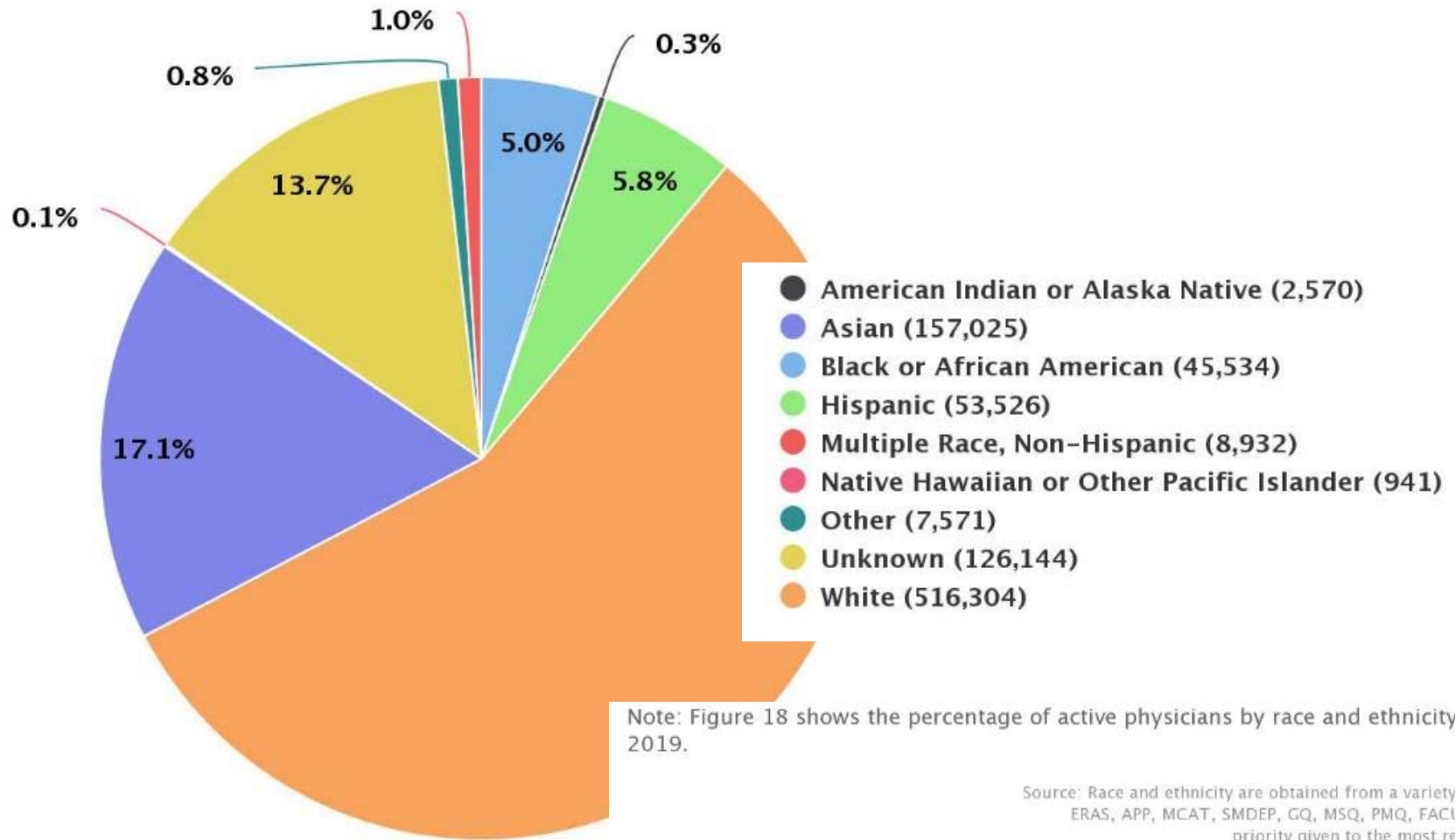
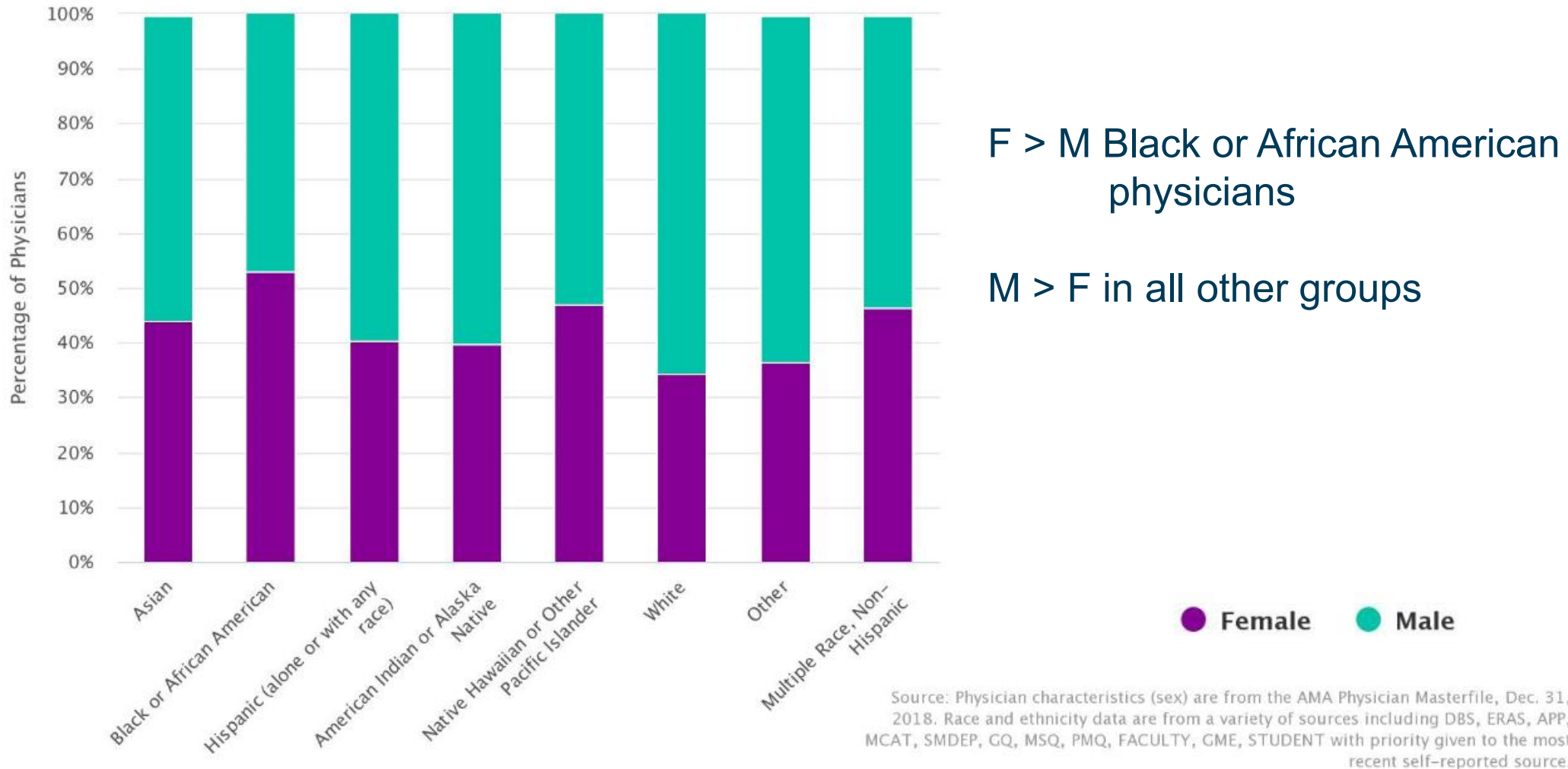


Figure 20. Percentage of physicians by sex and race/ethnicity, 2018.



Source: Physician characteristics (sex) are from the AMA Physician Masterfile, Dec. 31, 2018. Race and ethnicity data are from a variety of sources including DBS, ERAS, APP, MCAT, SMDEP, CQ, MSQ, PMQ, FACULTY, GME, STUDENT with priority given to the most recent self-reported source.



Tomorrow's Doctors, Tomorrow's Cures®

Diversity in the Physician Workforce: Facts & Figures 2014

About this Report

Section I: Cultivating a Health Care Workforce

Section II: Current Status of U.S. Physician Workforce

Section III: Geographic Distribution of the Physician Workforce by Race and Ethnicity

Section IV: Ad

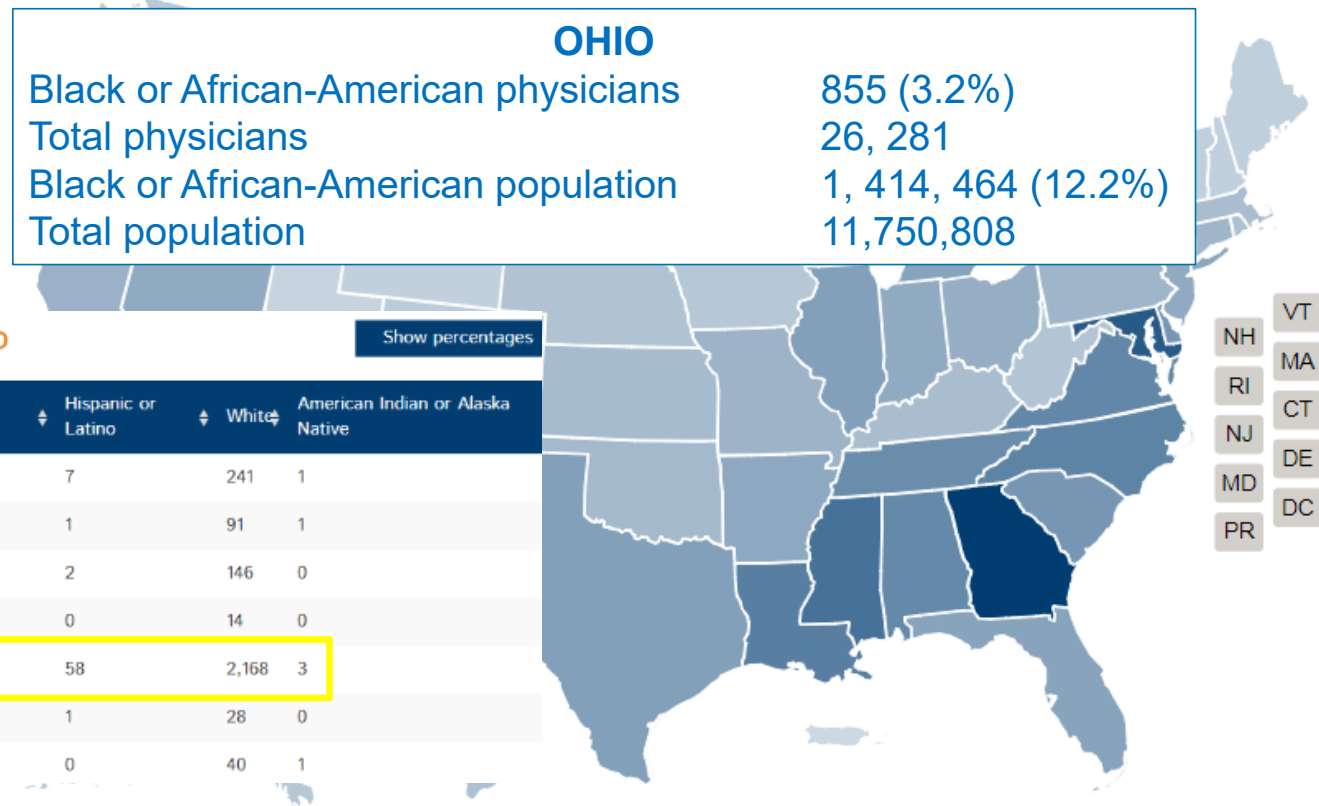
Section V: Add

Association of A

## Race and Ethnicity of Direct Care Physicians by State

The map below shows the concentration of select race or ethnicity of physicians per state. Roll over each state to ethnicity. County-level data can be seen by clicking on a state on the map.

Select Race/Ethnicity: Black or African-American Click on a state to view county data



### Total Physicians in Ohio

Show percentages

County	Asian	Black or African-American	Hispanic or Latino	White	American Indian or Alaska Native
Delaware	35	7	7	241	1
Erie	12	5	1	91	1
Fairfield	12	9	2	146	0
Fayette	2	0	0	14	0
Franklin	347	145	58	2,168	3
Fulton	1	2	1	28	0
Gallia	1	4	0	40	1

- VT
- NH
- MA
- RI
- CT
- NJ
- DE
- MD
- DC
- PR

# 2019 United States Census Bureau: Franklin County, OH and State of Ohio

Race and Hispanic Origin	Franklin County, Ohio	Ohio
Population estimates, July 1, 2019, (V2019)	NA	11,689,100
<b>PEOPLE</b>		
<b>Race and Hispanic Origin</b>		
White alone, percent	67.2%	81.9%
Black or African American alone, percent (a)	23.5%	13.0%
American Indian and Alaska Native alone, percent (a)	0.3%	0.3%
Asian alone, percent (a)	5.7%	2.5%
Native Hawaiian and Other Pacific Islander alone, percent	0.1%	0.1%
Two or More Races, percent	3.3%	2.3%
Hispanic or Latino, percent (b)	5.7%	3.9%
White alone, not Hispanic or Latino, percent	62.6%	78.7%

URM 30% Central Ohio

Central OH is more diverse compared to the entire state



AAMC FACTS & FIGURES 2016

# Diversity in Medical Education



DATA-DRIVEN DIVERSITY AND  
INCLUSION CHANGE

EXPLORE



CURRENT TRENDS IN MEDICAL  
EDUCATION

EXPLORE



GEOGRAPHIC DISTRIBUTION OF  
STUDENT POPULATION BY RACE  
AND ETHNICITY

EXPLORE





## Trends in Racial/Ethnic Representation Among US Medical Students

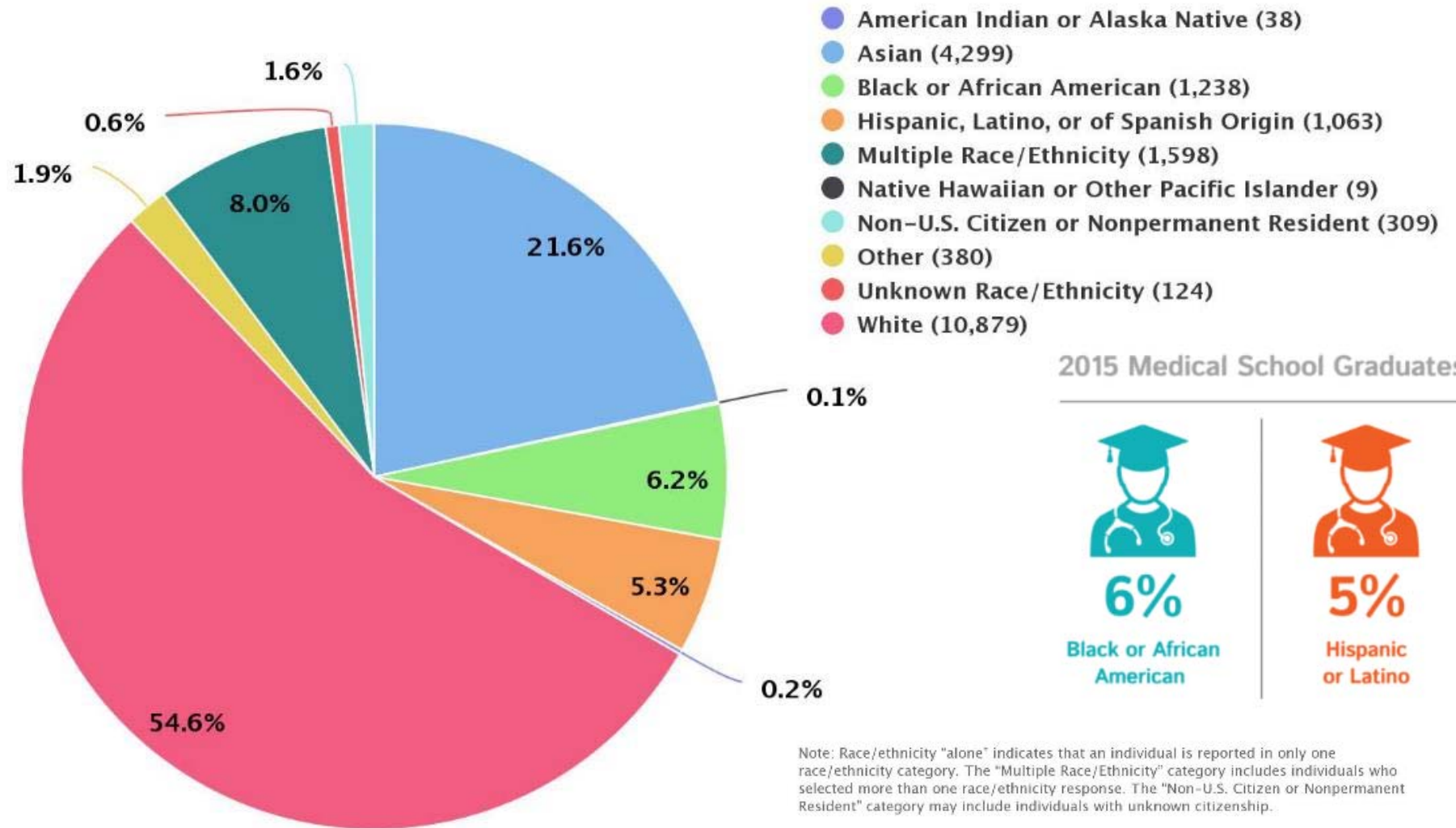
Lanair Amaad Lett, MBIostat; H. Moses Murdock, BS; Whitney U. Orji, BS; Jaya Aysola, MD, MPH; Ronnie Sebro, MD, PhD

**Proportions of Black, Hispanic, Asian, and Native Hawaiian or Other Pacific Islander male and females 20-34 yo increased**

**Black, Hispanic, AIAN underrepresented**

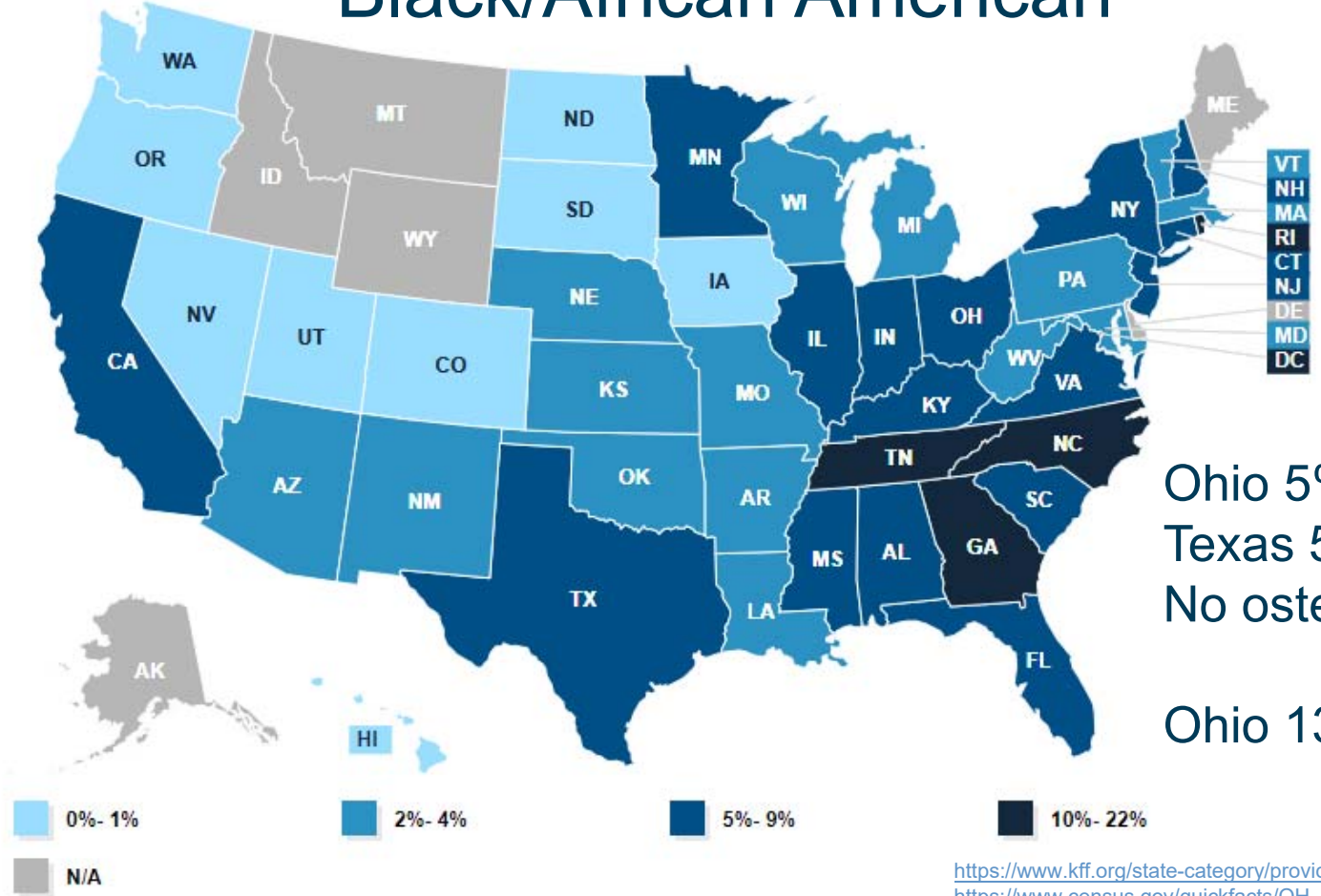
**Significant trend toward decreased representation of Black Female applicants**

Figure 13. Percentage of U.S. medical school graduates by race/ethnicity (alone), academic year 2018–2019.



Source: AAMC Data Warehouse: STUDENT and IND as of Aug. 19, 2019.

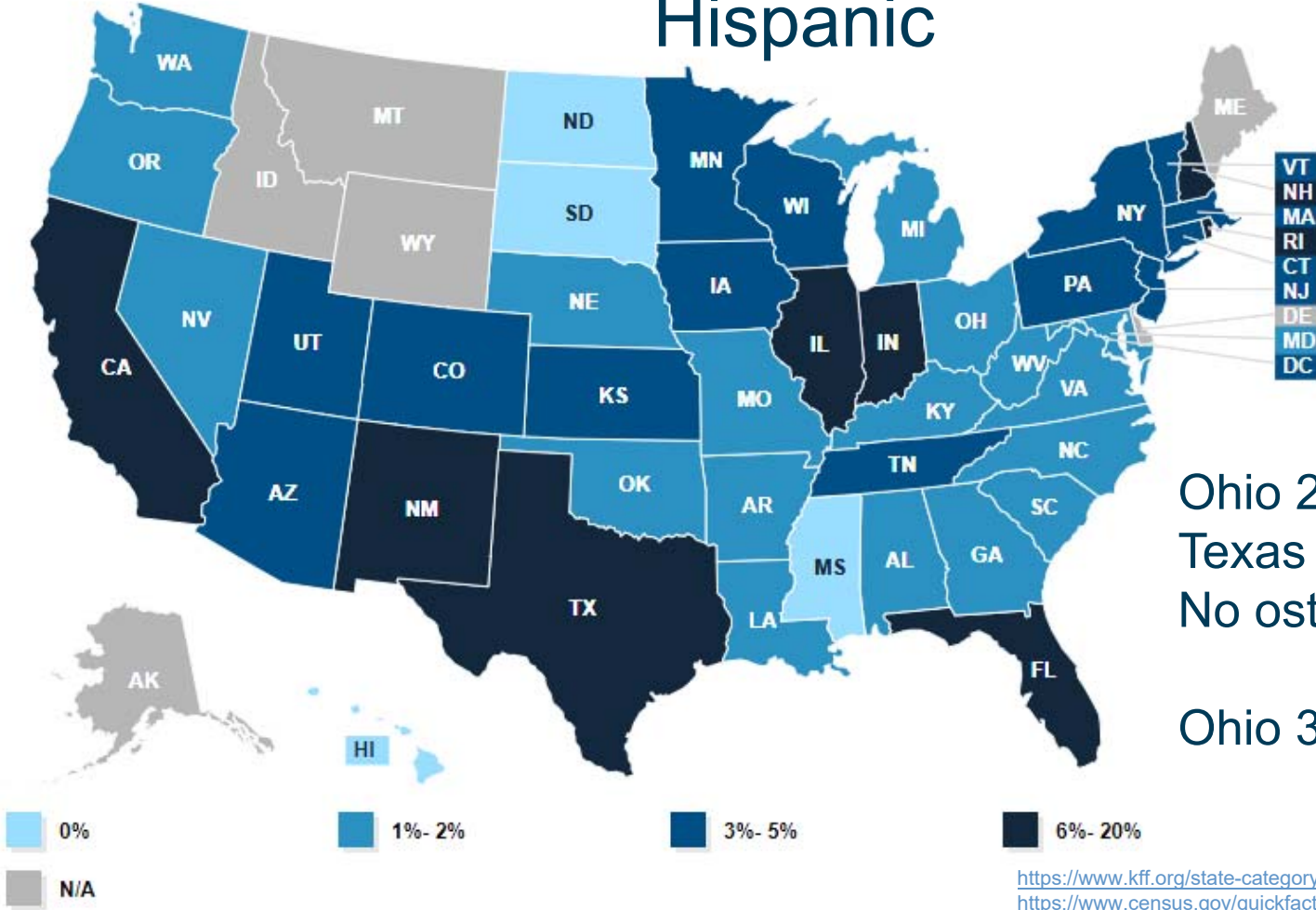
# 2018 Distribution of Allopathic Medical School Graduates Black/African American



Ohio 5% = 42 graduates  
 Texas 5% = 74 graduates  
 No osteopathic data  
 Ohio 13% population

<https://www.kff.org/state-category/providers-service-use/medical-school-graduates/>  
<https://www.census.gov/quickfacts/OH>

# 2018 Distribution of Allopathic Medical School Graduates Hispanic



Ohio 2% = 18 graduates  
 Texas 9% = 135 graduates  
 No osteopathic data

Ohio 3.9% population

<https://www.kff.org/state-category/providers-service-use/medical-school-graduates/>  
<https://www.census.gov/quickfacts/OH>

# ACGME Data Resource Book 2018-19

C.23

Number of Active Residents by Specialty and Subspecialty and Ethnicity

Specialty	Ethnicity						
	White, Non-Hispanic	Asian or Pacific Islander	Hispanic	Black, Non-Hispanic	Native American/Alaskan	Other	Unknown
ALL	59,359	25,029	7,395	6,184	276	7,594	34,554
PIPELINE	48,057	19,109	5,996	5,079	242	5,672	29,668

Active Hispanic/Latinx Residents 5.2%  
 Active Black/African American Residents 4.4%



Tomorrow's Doctors, Tomorrow's Cures<sup>®</sup>

## Addressing Racial Disparities in Health Care:

A Targeted Action Plan for Academic Medical Centers

- **Recommendation 1: Increase the Racial and Ethnic Diversity of the U.S. Physician Workforce**

Strong evidence supports the premise that increasing the racial and ethnic diversity of the physician workforce will increase the physician workforce in minority communities. In addition, a diverse medical student body enhances medical education for all students. Academic medical centers can expand their commitment to recruitment and enrichment programs to support the development of a diverse physician workforce.

2009



# HHS Action Plan to Reduce Racial and Ethnic Health Disparities

Goal II: Strengthen the Nation's Health and Human Services Infrastructure and Workforce

**A NATION FREE OF DISPARITIES  
IN HEALTH AND HEALTH CARE**

## Strategies:

Increase the diversity of healthcare and public health workforces

Increase the diversity and cultural competency of clinicians, including the behavioral health

workforce

BELIEVE IN WE  OhioHealth





# Reflection exercise



# Military Medicine & Veteran's Association (MMVA)



Language and Cultural Exchange

Non-traditional and Older Students



**SOCIETY OF PHYSICIANS WITH DISABILITIES**



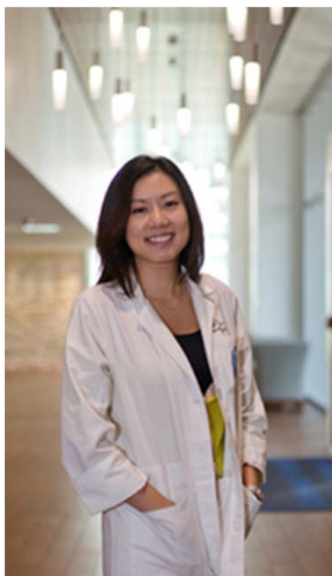
**BLACK MEN IN WHITE COATS**

**OhioHealth**

# Diversity and Inclusion at OhioHealth

Honoring the dignity and worth of every person.  
This is our Cardinal Value. This is who we are.

## Business Resource Groups (BRGs) to support and develop beyond medical education



**WE L.E.A.D**  
Women  
Empowering  
Leaders Educators  
Administrators  
Doctors



Veterans



PRIDE BRG



**WE**  
**D.R.E.A.M.**  
Develop Recognize,  
Elevate, Aspire, Mentor

# Diversity and Inclusion at OhioHealth

Honoring the dignity and worth of every person.  
This is our Cardinal Value. This is who we are.

## Medical Education Inclusion

Partnership with BRGS and PDS

URM support and networking

Inclusive recruitment goals

Population Health and QI Projects

Faculty Development

Partnership with Physician Recruiting

Care Site Diversity Councils

Inclusive Leadership Training

Unconscious Bias Training



# OhioHealth Self-Assessment

Total Ohio Physicians 2013	26,381
Ohio URM Physicians 2013	1,273 (4.8%)
OhioHealth URM Physicians 2017	106/3600 (3%)
OhioHealth Physicians did not identify/no data	48%

## OhioHealth Self-Assessment

FY19 New URM Physician hires	15 (11%) 2 are part time
FY 20 YTD New URM Physician hires	8 (9.4%)
OhioHealth URM Residents/Fellows 2019	32/414 (7.7%)
Ohio URM medical school graduates 2018	7%

## Objectives

---

Complete a self-assessment of your programs ethnic and racial diversity, support systems for underrepresented in medicine (URM) learners, and recruiting strategies

Identify gaps in your residency program to recruit and meet the needs of URM learners

**Create strategies to recruit URM students into your residency program through mentoring**

# OhioHealth Physician Diversity Scholars Program







Mentorship  
Interdisciplinary Curriculum  
Service opportunities  
Exposure to OH culture  
and GME programs



Provide pathways leading to the creation of a physician community

# Longitudinal curriculum

---

## M2

Study Skills  
Learning Styles

## M3

Hidden Curriculum  
Of clinical Years

## M4

Applying to Residency  
Interviewing for Residency

## Ongoing

Generational differences  
Responding to Racism  
Financial Advising  
Networking and Social events  
Becoming a competitive applicant to residency  
Shadowing opportunities/choosing the right specialty

# WE BELIEVE

**COMPASSION** means recognizing and responding to the emotional, physical and spiritual needs of others as if they were our own. Expressing genuine concern for another person's well-being is the gateway to healing and wholeness.

**EXCELLENCE** means challenging ourselves not to settle for good, but to reach for great. It's the continuous cycle of embracing risk, learning from failure, building on success, and teaching others to become the leaders who carry us forward.

**INCLUSION** means openly welcoming and respecting what makes each of us unique. When we seek diverse perspectives with positive intention and curiosity, and give people a voice in the decisions that affect their lives, we honor the dignity and worth of each person.

**INTEGRITY** means living our values through our honest words and honorable actions. We set high moral standards for ourselves and each other, and reflect the best of who we are when we achieve them together.

**STEWARDSHIP** means being thoughtful but charitable with our time, talent and resources, so we can deliver the very best care to all in need. When we pursue sustainability, we fulfill our duty to protect the health of our communities, and preserve our mission for generations to come.

## AT OHIOHEALTH, WE EXPECT YOU TO:

- + Seek diverse perspectives with intention and curiosity.
- + Promote diversity, equality and mutual respect.
- + Address personal biases that influence our behaviors.
- + Give people a voice in the decisions that affect their lives.
- + Challenge each other to grow, even when it's uncomfortable.
- + Take pride in our differences as well as our similarities.

*So that*  
**EVERYONE**  
*feels they belong.*

OH PDS has been featured at National Conferences as an Innovative Program for addressing the diversity of the physician workforce



**SNMA**  
THE STUDENT NATIONAL MEDICAL ASSOCIATION

**FAMILY MEDICINE  
EDUCATION CONSORTIUM, INC.**



ENGAGING EACH OTHER:  
**TRANSFORMATION  
THROUGH COLLABORATION**

2018 ACGME ANNUAL  
EDUCATIONAL CONFERENCE

March 1-4 | Orlando, Florida | Rosen Shingle Creek

#ACGME2018

BELIEVE IN WE  **OhioHealth**

## Educational Partners

---



Boonshoft  
School of Medicine  
WRIGHT STATE UNIVERSITY

OHIO  
UNIVERSITY



**Heritage  
College of  
Osteopathic  
Medicine**



**THE OHIO STATE UNIVERSITY**  
COLLEGE OF MEDICINE

# OhioHealth Physician Diversity Scholars Program



# Competitive Application Process

---

Similar metrics as residency requirements  
Assessed by a standardized rubric

Academics

Service

Additional degree/training/work experience

Leadership

Research/Scholarly activity

Personal statements

Grit  
EQ  
Professionalism



# Personal Statements

---

Describe your connection to Central Ohio. (100 words)

Submit a bio that best describes your passions and greatest accomplishments. (250)

In ten years from now, describe how you might impact health care disparities or diversity in health care in Central Ohio? (250)



## Assess Grit and EQ

---

Students schedules time and date  
Standardized questions  
15 min limit  
Blinded to scores, photo



**Tell me about a difficult time or situation and how did you get through it?**

**What questions do you have about the program**

# Mentor Recruitment

**woke** adjective

 Save Word

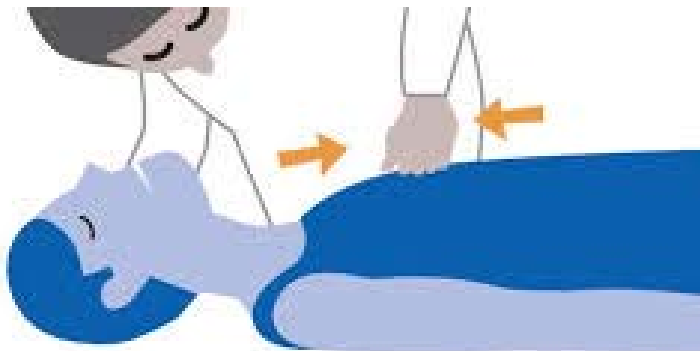
\ 'wōk \ 

woker; woked

## Definition of *woke* (Entry 1 of 2)

*chiefly US slang*

: aware of and actively attentive to important facts and issues (especially issues of racial and social justice)



fineart  
america

# Mentoring relationship

---

Expectations for mentors and mentees (scholars)

Tips successful relationship/mentoring across generations

Mentoring development

e-resources, social media posts  
mentor/mentee manuals

Group Social events

Annual program review/Mentorship awards



# Community service opportunities

---

Campus specific and whole group activities

Introduce and connect scholars to community

Offer activities to do with mentor and meet other mentors

Build CV

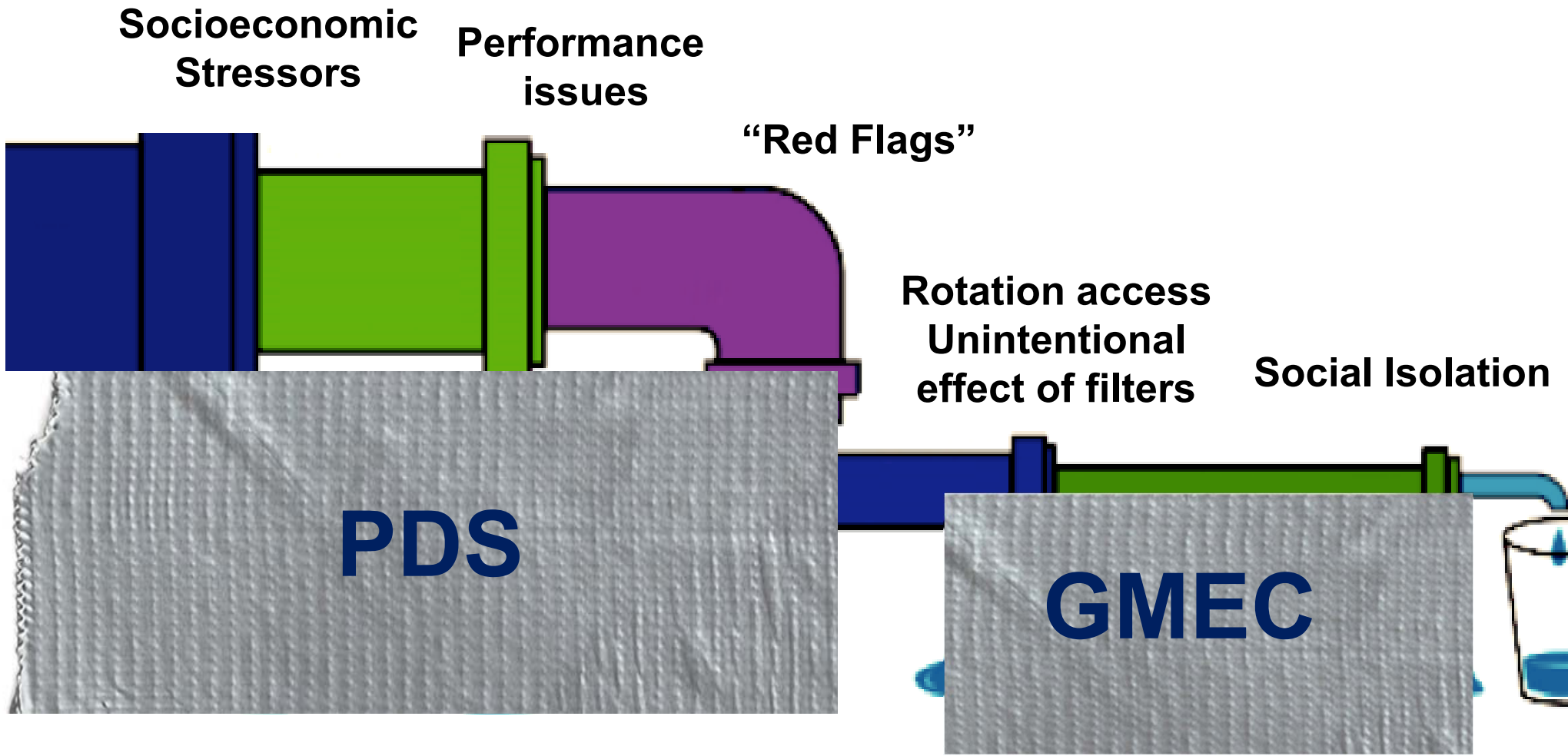


## Financial support

---

Scholars receive \$500 annual stipend

If scholars match into hospital system residency program, will receive \$10,000 annual loan repayment per year of training program









EVE I

# Exploring Diversity in Medicine

January 15<sup>th</sup>, 2020

Alexandra Blood, DO

Grant Family Medicine Program, PGY



## PDS Plus!

Initiative to engage URM residents who did not participate in PDS during medical school

Stipend

Mentoring to PDS alternate



## Lessons learned

---

Align scholar selection criteria with goals of the program

Stipend use for academic support

Identify concerns of academic performance and professionalism early

Partner with medical schools for intramural support systems and resources

## Lessons learned

---

Expectation setting for both mentors and scholars

Mentoring development

Connection to the community

Bridge the gap: retain residents as medical staff

### **Rotation Access**

PDS Priority Scheduling  
Permission scheduling  
URM rotation offerings  
Housing  
Travel  
Scholarships/stipends  
Food Allowance

### **Unintentional effect of Filters**

Holistic Review  
IAT  
Re-Evaluate first pass filters  
Re-Evaluate “weight” of application components  
Inclusive metrics  
Blinding to board scores  
Consult D/I for inclusion recs

### **Social Isolation**

Housestaff Diversity Council  
Inclusive Holiday Schedule  
PDS plus  
SNMA/LMSA sponsorship  
BRG involvement  
Denouncing racism  
Zero Tolerance Policies  
Responding to Racism Training  
Visibility of diverse residents  
Recruiting diverse faculty  
Faculty PDS Mentors  
[Social] media  
Inclusive messaging  
Cultural competency training

### **Aspirational**

Unlimited mentors  
Longer pipeline  
Targeted intervention for test taking for all at-risk students/residents/Learning specialist  
Partnership with Wellness on Wheels, OHRI, Office of Minority Health,  
Physician Recruiting  
Social Worker  
HBCU recruitment

# Small group: Brainstorming

---

## SWOT

Strengths  
Weaknesses  
Opportunities  
Threats



## SOAR

Strengths  
Opportunities  
Aspirations  
Results



# Report out session

---

## SWOT

Strengths  
Weaknesses  
Opportunities  
Threats



## SOAR

Strengths  
Opportunities  
Aspirations  
Results



### Rotation Access

PDS Priority Scheduling  
Permission scheduling  
URM rotation offerings  
Housing  
Travel  
Scholarships/stipends  
Food Allowance

### Unintentional effect of Filters

Holistic Review  
IAT  
Re-Evaluate first pass filters  
Re-Evaluate “weight” of application components  
Inclusive metrics  
Blinding to board scores  
Consult D/I for inclusion recs

### Social Isolation

Housestaff Diversity Council  
Inclusive Holiday Schedule  
PDS plus  
SNMA/LMSA sponsorship  
BRG involvement  
Denouncing racism  
Zero Tolerance Policies  
Responding to Racism Training  
Visibility of diverse residents  
Recruiting diverse faculty  
Faculty PDS Mentors  
[Social] media  
Inclusive messaging  
Cultural competency training

### Aspirational

Unlimited mentors  
Longer pipeline  
Targeted intervention for test taking for all at-risk students/residents/Learning specialist  
Partnership with mobile unit, research institute, Office of Minority Health,  
Physician Recruiting  
Social Worker  
HBCU recruitment

# Sources

---

<https://www.aamc.org/data-reports/workforce/report/diversity-facts-figures>

[https://development.ohio.gov/reports/reports\\_countytrends\\_map.htm](https://development.ohio.gov/reports/reports_countytrends_map.htm)

JAMA Network Open. 2019;2(9):e1910490. doi:10.1001/jamanetworkopen.2019.10490 (Rep

Department of Health and Human Services: Action Plan to Reduce Racial and Ethnic Health Disparities  
[https://www.minorityhealth.hhs.gov/npa/files/Plans/HHS/HHS\\_Plan\\_complete.pdf](https://www.minorityhealth.hhs.gov/npa/files/Plans/HHS/HHS_Plan_complete.pdf)

<https://www.kff.org/state-category/providers-service-use/medical-school-graduates/>

<https://www.census.gov/quickfacts/OH>

## Questions?

---

Nanette Lacuesta, MD

Director, OhioHealth Physician Diversity Scholars Program

Program Director, Physician Diversity Initiatives

Associate Program Director, Riverside Methodist Hospital FM Residency

[Nanette.Lacuesta@ohiohealth.com](mailto:Nanette.Lacuesta@ohiohealth.com)

Alexandra Blood, DO

PGY3 Grant Medical Center FM

## Annual Investment FY2018

---

Item	Annual cost
Student stipends (24 students x \$500)	\$16,000
Events (catering, rentals)	\$9,500
Supplies	\$500
Travel (Conferences, recruiting)	\$8,000
<b>Estimated total</b>	<b>\$34,000</b>

## Annual Investment FY 2021

---

Item	Annual cost
Student stipends (56 students x \$500)	\$28,000
Events (catering, rentals)	\$13,900
Supplies	\$2,200
Travel (Conferences, recruiting)	\$10,200
<b>Estimated total</b>	<b>\$54,300</b>

Figure 15. Percentage of full-time U.S. medical school faculty by race/ethnicity, 2018.

