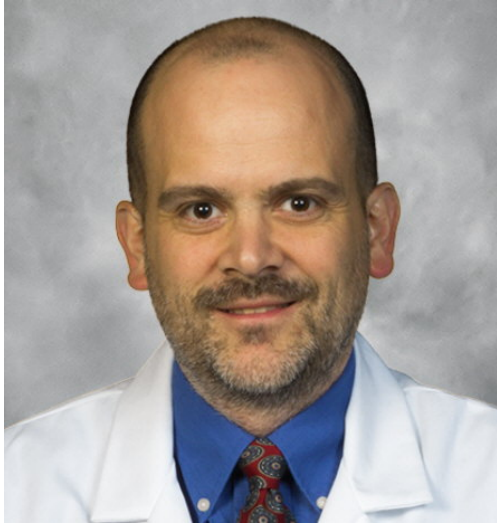


# Supporting Inclusion Culture: Creating a Forum for Safe Discussion

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# Learning objectives

1. Identify modalities to evaluate your program's inclusion efforts and gaps
2. Create an action plan to develop an inclusion culture with resident and faculty engagement
3. Use case discussions with EQ-based facilitation to open discussion and learning around inclusion and cultural competence

# Reflection exercise:

What modalities are used to evaluate your program's inclusion efforts?

...to identify your program's gaps?

# What is OhioHealth?



# OhioHealth Residency Programs

## Adult Psychiatry

Riverside Methodist Hospital

## Anesthesiology

Doctors Hospital

## Dermatology

Riverside Methodist Hospital

## Emergency Medicine

Doctors Hospital

## ENT

Doctors Hospital

## Family Medicine

Doctors Hospital

Dublin Methodist Hospital

Grant Medical Center

O'Bleness Hospital

Riverside Methodist Hospital

## Foot & Ankle Surgery

Grant Medical Center

## General Surgery

Doctors Hospital

Riverside Methodist Hospital

## Internal Medicine

Doctors Hospital

Riverside Methodist Hospital

## Obstetrics & Gynecology

Doctors Hospital

Riverside Methodist Hospital

## Ophthalmology

Doctors Hospital

## Orthopedic Surgery

Doctors Hospital

## Osteopathic

## Neuromusculoskeletal Medicine

O'Bleness Hospital

## Preliminary Medicine

Riverside Methodist Hospital

## Preliminary Surgery

Riverside Methodist Hospital

## Transitional Year

Riverside Methodist Hospital



OhioHealth Grant  
Family Medicine Residency









Accreditation Council for  
Graduate Medical Education



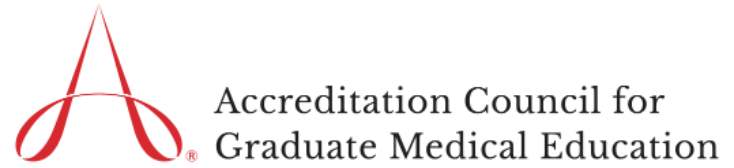
## Our Values

Compassion, Excellence, Stewardship, Integrity,  
Inclusion

# Reflection exercise:

How can self-assessment be done in your program or medical education department?

N = 38



“Negative” or “Extremely Negative” = 21%

Significantly below national average:

- Faculty and staff are interested in resident education and create environment of inquiry
- Satisfied that evaluations of faculty and residency program are confidential
- Satisfied that program uses evaluations to improve the program
- Satisfied with process to deal with problems and concerns
- Residents can raise concerns without fear



**What needs to be done to set up a safety culture to allow the conversation?**

Image Credit: Carol Kohen Getty Images

# Case study development

You are a female Muslim resident doing an admission overnight for sepsis with the new Asian female junior resident. The patient needs a central line placed so you begin to obtain verbal and written consent. The patient states, “I want the procedure done if it’s going to help me, but I don’t really want YOU to do it.”

You ask for further explanation of her specific and the patient states, “Well, my son’s a doctor and my doctors usually look different, you know what I mean?”

She looks over to the middle aged White male medical student, and gestures to him saying, “You know what I mean, right? I would just feel safer if you did it.”

You are rounding as a team and the patient refuses to have a procedure completed by the female resident and only wants the male medical student to complete the procedure.

How would you handle this interaction?

Pt presents for follow up appointment. You walk in and the patient says, “I am so happy to finally get a real doctor! I usually see that doctor ‘Bulabula’ or whatever her name is, and I can’t even understand what she’s saying.”

You enter an exam room and the patient says they will only talk with a white physician.

How would you respond?

# Facilitator Guide

Standardized guide to introduce the topic to participants

Background—why practice in responding to bias and discrimination is important

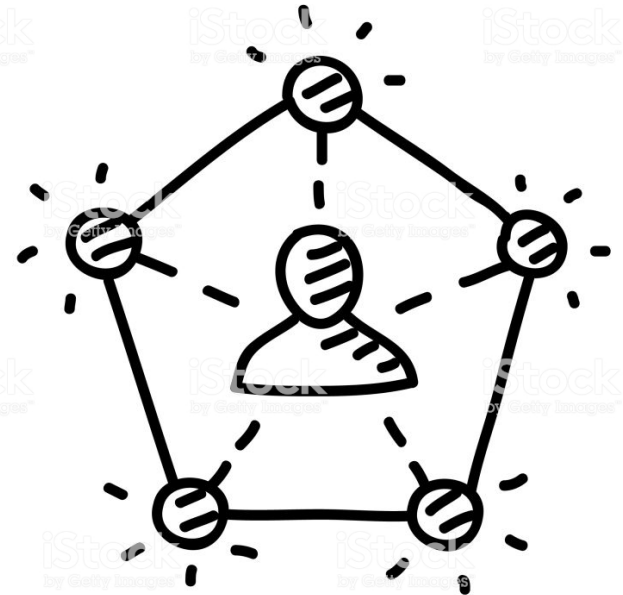
Ground Rules



# Facilitator Guide

Why does D&I matter to you?

What is your story?



**PERSONAL  
CONNECTION**



You might hear something you don't agree with or  
causes a negative feeling

Everyone is here because they want to  
learn and improve



Show respect to other's point of view and ideas

Listen, don't interrupt, show grace your responses



Everyone has different experiences  
that shape their reality

Use the exercise as an opportunity  
to learn from others



This is a pilot

We are open to your feedback and hope to continually improve this process to make this a useful educational experience

# Cases

- Physician developed
- Physician led
- Supported by HR

# Facilitation

Read case

Think

Share

Pair

Report out

**How do you feel?**

**How could the people in the case feel?**

**How would you react?**

**What did you hear?**

# Let's try it!



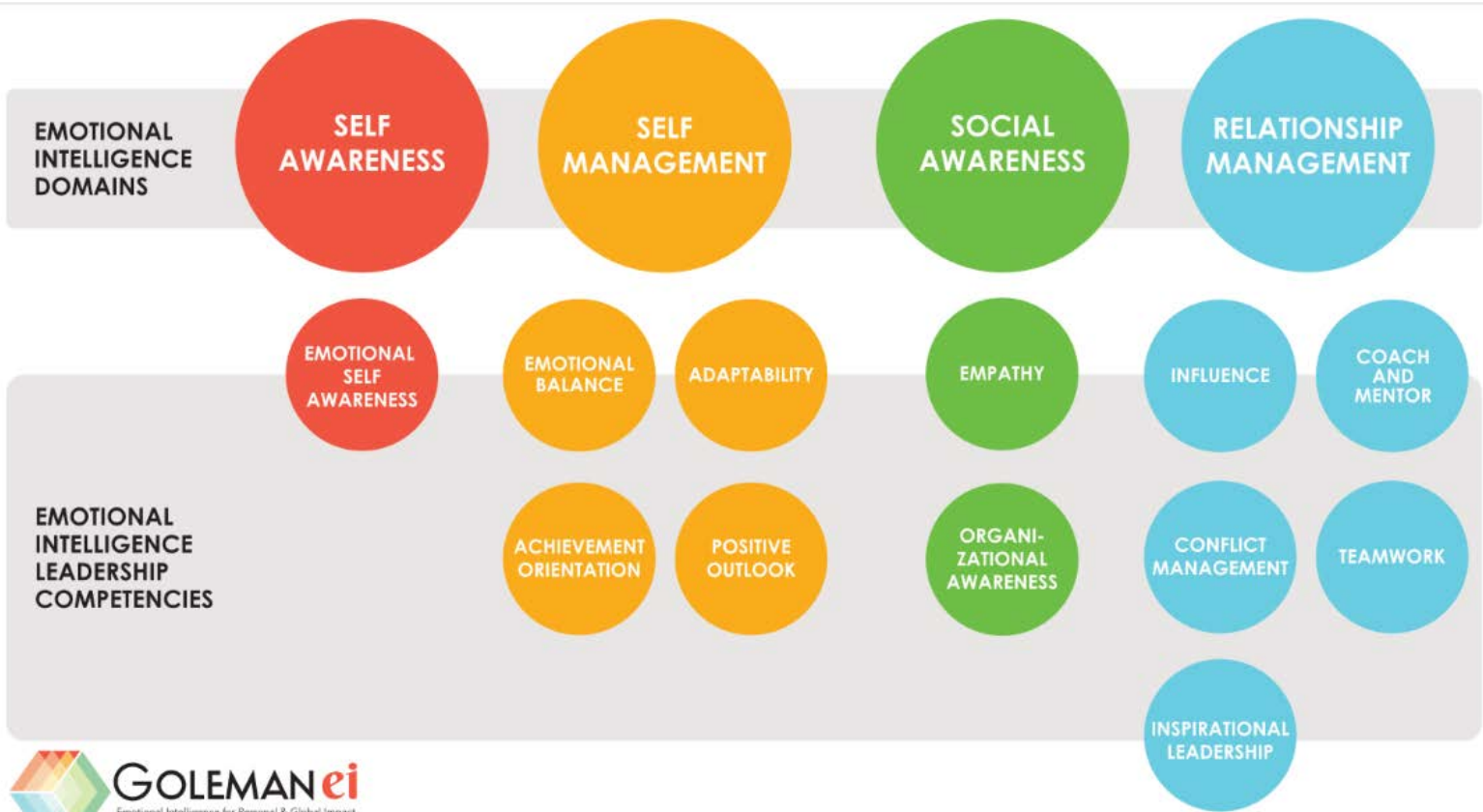
# Case 1

A) You enter an exam room and the patient says they will only talk with a white physician.

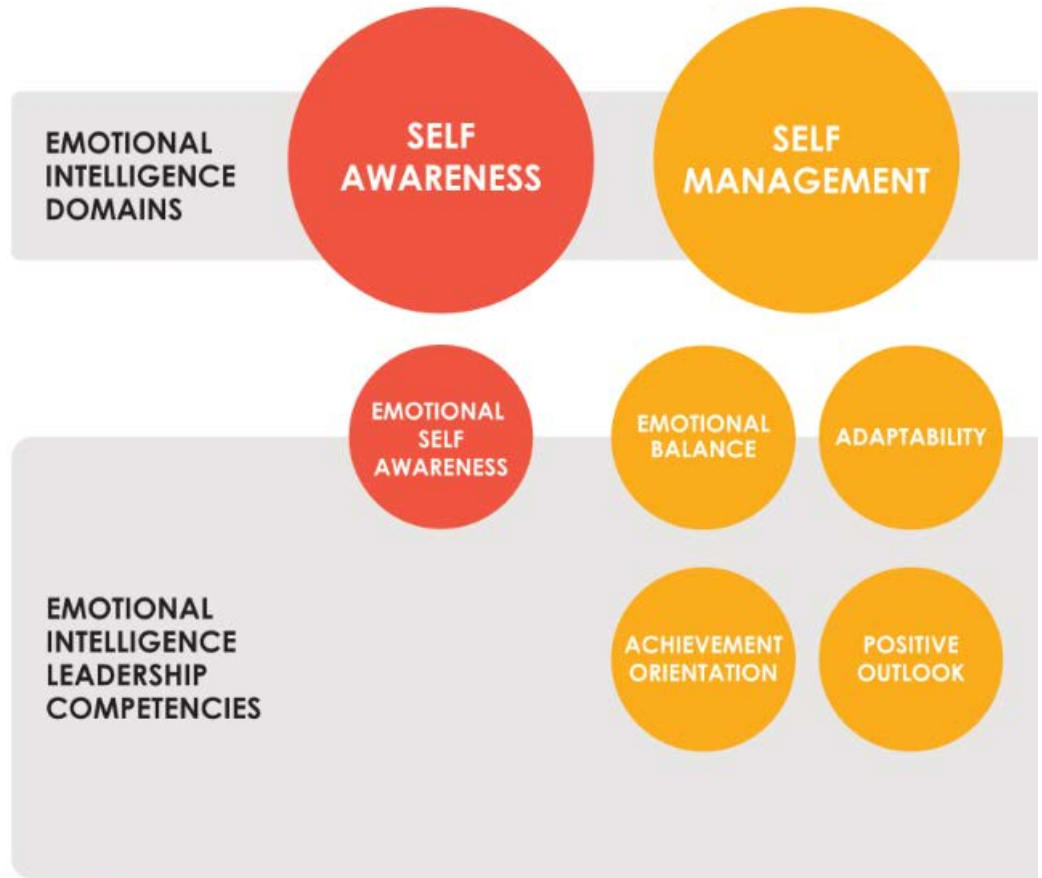
B) To a faculty member:

A resident comes to you and says the patient they are currently scheduled to see refuses to be seen by them because they only want to be seen by a white physician.

# What did you hear?



How do you feel?



How might the people  
in the case feel?

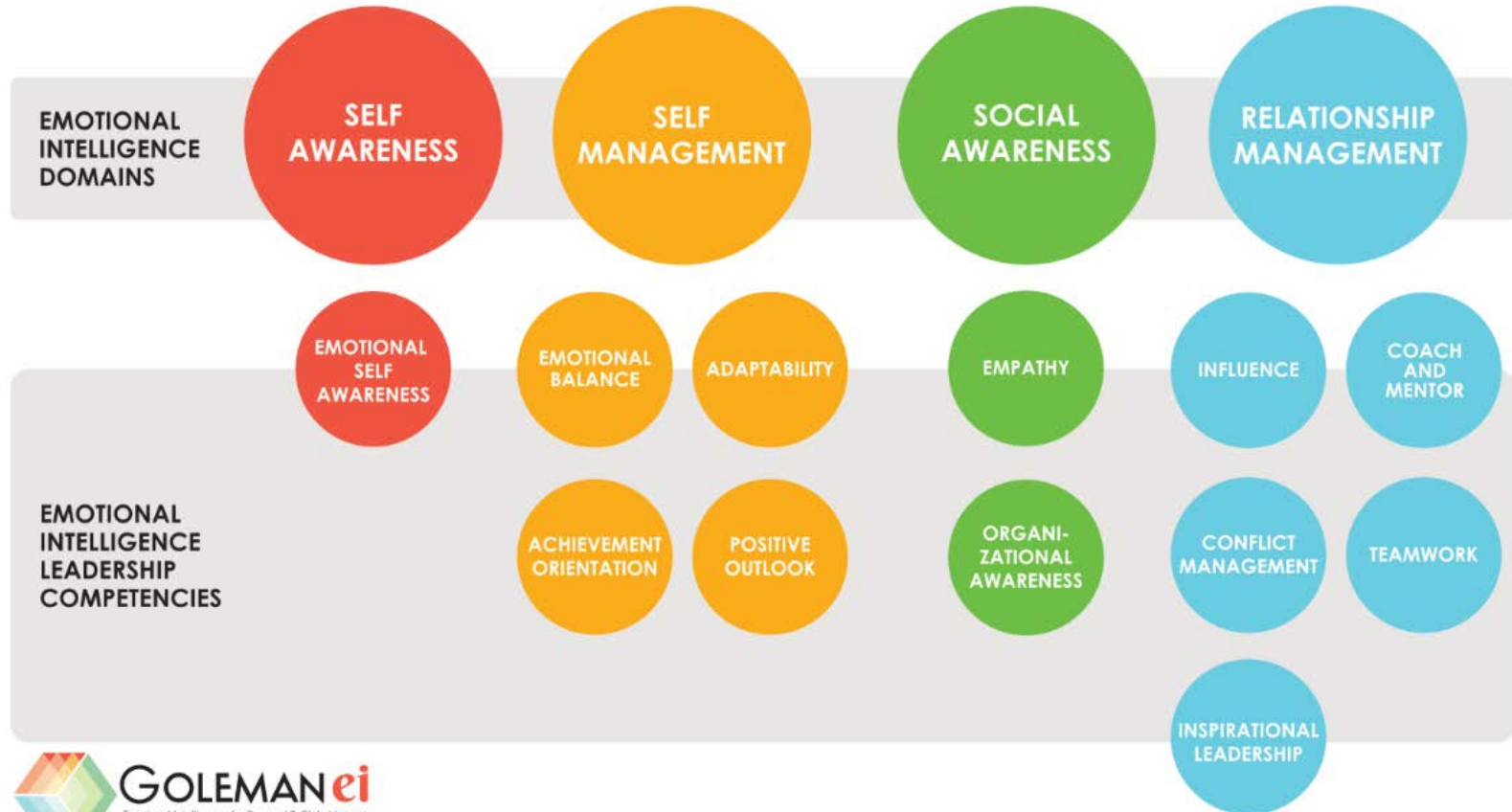


SOCIAL  
AWARENESS

EMPATHY

ORGANI-  
ZATIONAL  
AWARENESS

# Think-pair-share



# Think-Pair-Share & What did you hear?

EMOTIONAL INTELLIGENCE DOMAINS

SELF AWARENESS

SELF MANAGEMENT

SOCIAL AWARENESS

RELATIONSHIP MANAGEMENT

EMOTIONAL SELF AWARENESS

EMOTIONAL BALANCE

ADAPTABILITY

EMPATHY

INFLUENCE

COACH AND MENTOR

EMOTIONAL INTELLIGENCE LEADERSHIP COMPETENCIES

How do you feel?

ACHIEVEMENT ORIENTATION

POSITIVE OUTLOOK

ORGANIZATIONAL AWARENESS

CONFLICT MANAGEMENT

TEAMWORK

How might they feel?

INSPIRATIONAL LEADERSHIP

# Case 2

A) An MA comes to you and says the patient you are about to see used negative slurs directed at them due to being black.

How would you respond to the MA and patient?

B) You witness a staff member making an inappropriate racist comment or joke.

How do you approach this situation with the staff member?

# Facilitation

Read case

Think

Share

Pair

Report out

**How do you feel?**

**How could the people in the case feel?**

**How would you react?**

**What did you hear?**





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