

Implementing Systemic Culture Change to Improve Diversity in Graduate Medical Education

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AIAMC Annual Meeting
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*Welcome
&
Introductions*



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KEEP GETTING BETTER



We all should know that diversity makes for a rich tapestry, and we must understand that all the threads of the tapestry are equal in value no matter what their color.

— *Maya Angelou* —

AZ QUOTES



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Outline

- Why is this topic important?
 - Recognition that a diverse workforce is critical to achieving the best patient care outcomes
 - Attention to Diversity, Equity and Inclusion (DEI) will help build safe and equitable learning environments
 - Addressing racial disparities in healthcare will promote health equity
- What else do we know?
 - Residents from underrepresented in medicine (URIM/minority backgrounds are more likely to leave residency programs and suffer burnout
- As a result...
 - ACGME has been more focused on ensuring that sponsoring institutions (SIs) and individual residency and fellowship programs are explicit regarding recruitment and retention as well as other initiatives to address the learning environment and curriculum

How We Will Be Spending Our Time

- Welcome and introductions – 5 minutes
- Setting the stage – 12 minutes
- Introduction of tabletop exercise – 5 minutes
- Tabletop exercise (review of vignettes) – 25 minutes
- Report outs – 25 minutes
- Wrap up – 3 minutes

While research demonstrates that members of underrepresented minorities are far more likely to leave academic medicine if not the profession of medicine, **what is not yet well understood are viable strategies to mitigate attrition and increase retention, specifically in GME.**

Without understanding how to create an environment that can sustain and foster underrepresented minorities, efforts at recruitment will not manifest meaningful progress in creating a diverse learner, clinician, and administrator workforce.

Integrating a Sustainable Diverse and Inclusive GME Workforce

AAMC Learn Serve Lead - Saturday, November 9, 2019

Facilitator

David, S. Kountz, MD, Designated Institutional Official and Vice President, Academic Affairs, Co-Chief Academic Officer, Hackensack Meridian Health, Associate Dean, Diversity and Equity, Hackensack Meridian School of Medicine at Seton Hall University, GRA 2019-2020 Chair

Speakers

Joanne Bailey, MD, General Surgery Resident, Rutgers New Jersey Medical School

William A. McDade, MD, PhD, Chief Diversity and Inclusion Officer, Accreditation Officer for Graduate Medical Education

Kathryn Andolsek, MD, MPH, Assistant Dean, Duke University School of Medicine



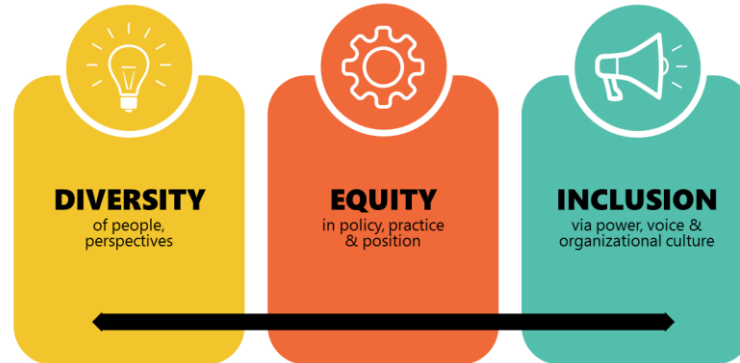
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Examples of a Focus from ACGME (1)

As part of the Annual Institutional Review Questionnaire:

Describe your Sponsoring Institution's engagement in practices that focus on ongoing, mission-driven, systematic recruitment and retention of a diverse and inclusive workforce of residents/fellows, faculty members, senior administrative staff members, and other relevant members of your GME community.



Examples of a Focus from ACGME (2)

As part of the program Annual Program Evaluation:

Describe how the program will achieve/ensure diversity in trainee recruitment, selection, and retention.

Please describe in detail what efforts your specific program is doing to advance diversity and inclusion for residents. Evidence based strategies and program success stories are strongly encouraged. Examples should only include efforts that the medical school or sponsoring institution is doing if it is done in partnership with your program, which is encouraged.

Describe how the program will achieve/ensure diversity in the individuals participating in the training program (e.g. faculty, administrative personnel, etc.).

Please describe in detail what efforts your specific program is doing to advance diversity and inclusion for faculty, administrative personnel, etc. Evidence based strategies and program success stories are strongly encouraged. Examples should only include efforts that the medical school or sponsoring institution is doing if it is done in partnership with your program, which is encouraged.

The Annual Resident Survey Includes Three Questions Related to D&I

Diversity and Inclusion

	% Program Compliant	Program Mean	% Specialty Compliant	Specialty Mean	% National Compliant	National Mean
Preparation for interaction with diverse individuals	100%	4.2	93%	4.2	95%	4.3
Program fosters inclusive work environment	94%	4.2	95%	4.4	97%	4.5
Engagement in program's diverse resident/fellow recruitment/retainment efforts	83%	4.0	89%	4.0	90%	4.1

Implementing Systematic Culture Change to Improve Diversity in Graduate Medical Education

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Franklin Trimm, MD (@ftrimm3)

David Kountz, MD (@docdk59)
Jessica Bienstock, MD, MPH (@JBienstockMD)

The Challenge

Do the best you can until you know better. Then when you know better, do better.

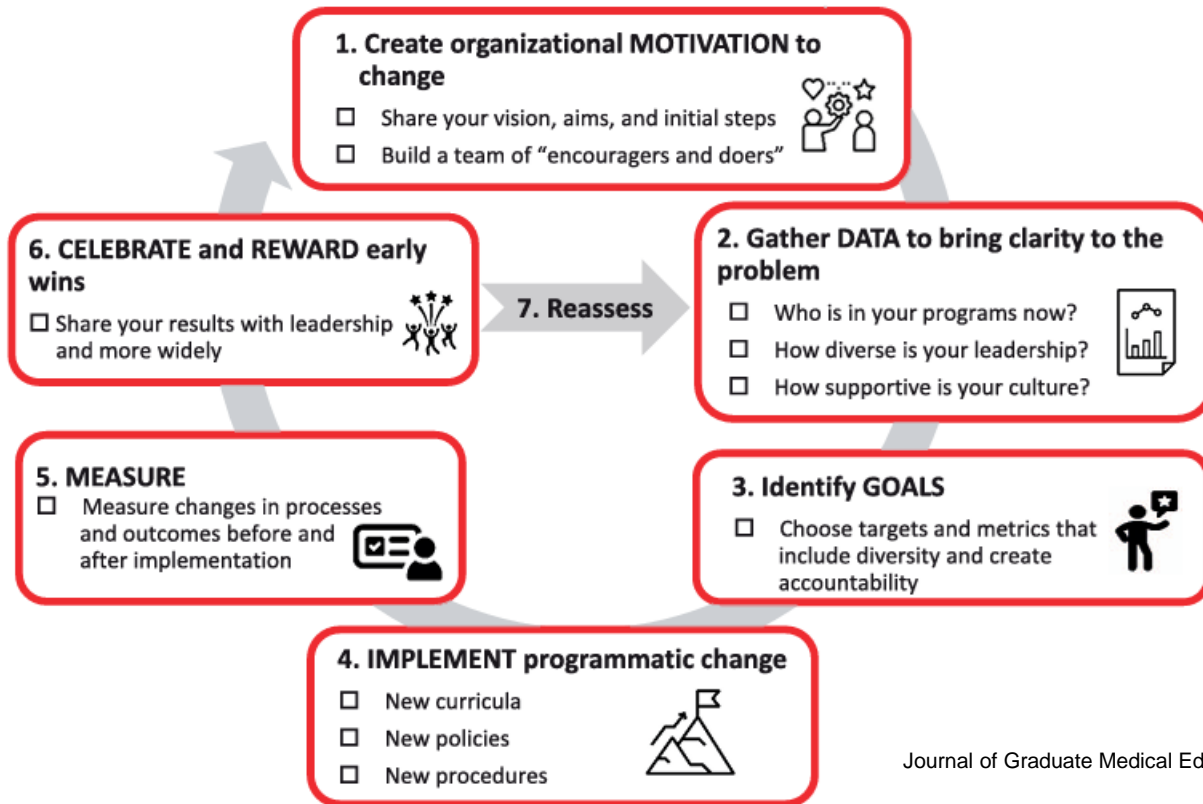
—Maya Angelou

Diversity, equity, inclusion, and justice (DEIJ) are all pivotal elements in bettering our world. Yet, we have insufficiently understood the impact of these elements in health care and sparsely identified ways to prioritize them for eliminating health care disparities. As physicians and educators, we can

RIP OUT ACTION ITEMS

1. Identify diversity, equity, inclusion, and justice (DEIJ) goals and a culture-focused change model to guide your work.
2. Persist—be prepared to engage in rapid cycle changes driven by data.
3. Outline resources needed, budget for them proactively, and implement.
4. Collaborate with internal and external allies forming a community of support; DEIJ work is hard and imperative for graduate medical education.

RAPID CYCLE CHANGES TO IMPROVE DEI



Tabletop Exercise

Using the rapid cycle change model, each table will discuss two vignettes, keeping the following questions in mind:

1. Does the program have a commitment to change? If not, what would it take to create motivation for change? Who are your key stakeholders?
2. How supportive is the culture in the department?
3. What are programmatic changes that could be made to address DEI (curriculae, policies, procedures)?

Tabletop Exercise

- Each table will have a group leader assigned who will ensure that they stay on time and task and that everyone contributes to the discussion
- Remember, there are no right or wrong answers, and its okay if you are at the very beginning of your DEI journey!
- The group leader should ask someone to keep notes of key points of the discussion, as well as another group member who will summarize the discussion for the report out

Vignettes -1

1. Your program attracts very few minority applicants, and there is not much interest in change from the Department Chair. Her opinion is “when there are more applicants, we will attract more prospective residents.” She also tells you that she has little money for new initiatives. What are some practical steps you can take to begin to address culture change in this department?
2. For as long as you can remember the few minority residents in your program have all left the area or taken a job with the health network across town. Department leadership has taken the position that your role is to train the residents, not find jobs for them. However, times are changing, and the leadership is now desperate to replace retiring physicians and match providers with the communities served. The Chair is looking for ideas to recruit more residents – but especially minority residents – directly out of your program.

Vignettes - 2

3. Your health network recently hired a Chief Diversity Officer, and there is a new network-wide initiative to teach employees about health equity. Your program director doesn't spend a lot of time thinking about health equity and feels that "a disease is a disease." What are steps you can take to incorporate health equity into the residents' curriculum?
4. Department leadership feels that too much attention to DEI may "turn off" some applicants and, as a result, they aren't enthusiastic about highlighting this on your program website. What compelling arguments can you make to enlighten your leadership, and how would you update your program website?

Vignettes - 3

5. A couple of residents in your program approach you requesting that the program recognize “Juneteenth.” When you ask the Chair for his support, his response is “what is Juneteenth?” When you explain, he is ambivalent and says that he is too busy to participate. How do you proceed?
6. A minority female resident in your program requests a meeting to discuss frequent comments about her hair by staff members, fellow residents and faculty. When she has asked for the comments to stop, she is met with comments like “what’s the big deal” and “don’t be so sensitive.” She has gone to the Chief Residents and Associate PDs with no one taking her seriously. She is now coming to you. She is thinking about transferring to another program. What steps do you take?

Report Outs

