

Learn Serve

Lead

### GDI Navigator to Excellence: Strategic Planning Webinar

GDI Steering Committee May 9, 2013

> Association of American Medical Colleges

## **Today's Webinar**

- Make sure to adjust your speaker volume on your computer
- To ask a question, please use the Q&A box to the right of the screen
- Questions we do not answer today will be addressed at other upcoming opportunities
- This webinar will be recorded and posted at www.aamc.org/gdi



### Welcome from Chief Diversity Officer Dr. Marc A. Nivet



### **Speaker Introductions**



#### Wanda D. Lipscomb, Ph.D.

Chair, Group on Student Affairs Committee on Diversity Affairs Senior Associate Dean for Diversity and Inclusion Michigan State University College of Human Medicine

#### David A. Acosta, M.D., FAAFP

Chair, Group on Diversity and Inclusion Chief Diversity Officer, UW School of Medicine Director, Center for Equity, Diversity & Inclusion Clinical Professor, Department of Family Medicine University of Washington School of Medicine

#### Maria L. Soto-Greene, M.D.

Past-chair, Group on Diversity and Inclusion Vice Dean and Professor of Medicine Director, Hispanic Center of Excellence University of Medicine and Dentistry of New Jersey-New Jersey Medical School

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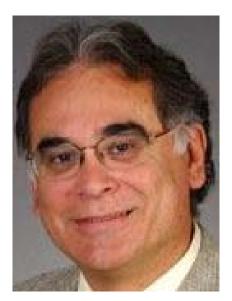


# **Learning Objectives**

- Describe some of the necessary elements for success in developing an institutional diversity strategic plan
- Discuss some of the necessary elements for success with **implementing** an institutional diversity strategic plan
- Describe how LCME accreditation diversity standards can help serve as **leverage** for your diversity initiative, and how a diversity strategic plan can help **improve** your LCME site visit



### **Diversity Strategic Planning: A Primer**



#### David A. Acosta, M.D., FAAFP

Chair, AAMC Group on Diversity and Inclusion Chief Diversity Officer, Office of the Dean Director, Center for Equity, Diversity and Inclusion Clinical Professor, Department of Family Medicine University of Washington School of Medicine



### **Development & Implementation**

Challenging, complex process

Alignment with institutional mission, vision, values along every step

• Create strong foundation for the initiative

Assessment of the institution's landscape



# **Tips for Success - Development**

- Integrated into the overall strategic plan and success of the institution – not 'siloed'
- Not just about affirmative action and EEO
- Build diversity efforts around existing strengths
   and infrastructure
- Understand institutional culture and climate
  - Senior leadership commitment deliberate, transparent, visible, clear expectations
- *Continuous* improvement process
- Plan for sustainability from the start



### **Diversity Strategic Plan Template -Example**

- 1. Rationale background/purpose
  - Imperatives driving this initiative
- 2. Conceptual framework
  - Structure
  - Core concepts
  - Methodology assessment & findings
- 3. Implementation\*
- 4. Communication
- 5. Appendices



# \*Implementation

- Goals for diversity and inclusion
  - o Alignment
  - Prioritization
- Objectives strategies to achieve each goal
- Key tasks and action steps
  - o Assign lead, timeline, resources needed
- Measures of success
  - Assign responsibilities
  - Design metrics



### **Tips for Success - Implementation**

- Build the educational foundation\*\* of the team
- Clear, focused vision
- Change readiness
- Establishment of your role with the process
- Identify leverage early
- Infrastructure is paramount
  - Human capital and building capacity
  - Advisory council
- Accountability is key



### Sharing the NJMS "Diversity" Experience



#### Maria L. Soto-Greene, MD

Past-chair, Group on Diversity and Inclusion Vice Dean and Professor of Medicine Director, Hispanic Center of Excellence University of Medicine and Dentistry of New Jersey-New Jersey Medical School



### A "40" Year Journey

1968	<ul> <li>A formal pledge is made to the city under the "Newark Agreements"</li> </ul>
1972	<ul> <li>Establishment of the Office of Minority Student Affairs</li> <li>Start of Undergraduate Pipeline Programs</li> </ul>
1981	<ul> <li>High school students into the "Pipeline"</li> </ul>
1991	Award of our first Hispanic Center of Excellence grant
1996	<ul> <li>Implementation of partnerships and restructuring of our pipeline programs</li> </ul>
2000's	NJMS broadens its definition of diversity to include groups who are underrepresented in medicine
2012	<ul> <li>The Office of Special Programs is renamed the Office for Diversity and Community Engagement (ODACE)</li> </ul>
Present	• Commitment to diversity in the NJMS strategic plans over the decades; 2012 plan integrates and expands diversity rather than listing it as a separate goal

**Å**AAMC

# **Diversity: Preparing for the LCME**

Needs Assessment: Define your target groups, programs and activities that contribute to diversity

- Medical Student Graduation Questionnaire
- Independent Student Analysis
- Applicants, Matriculants, and Admissions Trend Data (7 years)
- Faculty Data (3 years)
- Faculty Forward
- Resident Data (3 years)
- Reviewed all mission statements: School wide; Offices of Admissions; Faculty Affairs; Student Affairs; and Diversity and Community Engagement
- Strategic Plan
- Curriculum: Education wide Goal that addressed the Health of the Community

### NJMS "New Beginnings" Strategic Plan and LCME Self-Study Process

- The Dean's charge to the Strategic Plan steering committee included:
- "Redefinition of the School's mission and vision while maintaining its core values of discovery, educational excellence, diversity and service to the community;
- Creation of a sense of optimism and transformation to a stronger, unified organization focused on a common purpose;
- Wide engagement of diverse groups of faculty, staff and students at all levels, in imagining a new direction for themselves and our institution;
- Development of an innovative, achievable strategic plan that will position NJMS for success in the rapidly changing University and healthcare environment. "



# Think across the continuum of LCME standards

LCME Subcommittees organized: How do these standards build your case or identify areas of improvement needed to achieve diversity?

- •Institutional Setting (IS-1, IS-14 & IS-16)
- •Educational Program (ED-21 & 22)
- •Faculty (FA-4 & 11)
- •Medical Students (MS-3, MS-6 & MS 8)
- •Educational Resources: Affiliation Agreements



### NJMS "New Beginnings" Strategic Plan

Diversity viewed as a strength:

NJMS has a commitment to diversity and has fostered a spirit of inclusiveness for its highly diverse community, faculty, staff and students.

- Diversity in leadership positions;
- One of the most diverse student bodies in the nation, which leads to a diverse healthcare workforce at NJMS;
- Pipeline Programs (1972) & continuous funding since 1991 for the Hispanic Center of Excellence;
- Urban, culturally diverse community- opportunity to treat a patient population that presents with conditions covering the spectrum of chronic and acute illnesses;
- Robert Wood Johnson Foundation Summer Medical-Dental Education Program.



### NJMS Ranks Among Most Diverse Medical Schools

TABLE Prepare a Diverse Physician Workforce

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University of Medicine and Dentistry of New Jersey-New Jersey Medical School Benchmarked against All Medical Schools

	Graduates from 2006 through 2011							Full-Time Faculty as of December 31, 2011					
Percentile	Total Graduates			Number who are American Indian or Alaska Native	American Indian			Total Faculty	Number who are Women	Percent who are Women	Number who are Hispanic or Latino, American Indian or Alaska Native, or Black or African- American	Percent who are Hispanic or Latino, American Indian or Alaska Native, or Black or African- American	
		136	13.8%			112	11.4%						
90	1,147	129	12.9%	13	1.7%	93	10.5%	2,076	794	43.0%	147	12.4%	
80	996 984	75	8.8%	9	1.2%	77	8.9%	1,581	581	39.8% 38.1%	103	9.4% 8.2%	
70	934	53	6.9%	7	0.9%	61	8.0%	1,313	472	38.0%	87	7.9%	
60	876	44	5.3%	6	0.7%	53	6.6%	1,122	386	36.5%	76	6.6%	
50	806	34	4.3%	5	0.6%	45	5.7%	899	321	35.0%	57	5.7%	
40	669	26	3.6%	4	0.5%	35	4.4%	734	261 238	33.8%	<mark>51</mark> 49	5.3%	
30	600	19	2.7%	3	0.4%	25	3.4%	625	213	32.7%	36	4.5%	
20	543	14	2.0%	2	0.3%	21	2.7%	381	136	31.4%	30	4.1%	
10	386	10	1.4%	1	0.1%	8	1.3%	232	73	29.4%	20	3.6%	
Mean	785	55	8.3%	7	0.9%	54	7.3%	1,101	403	35.7%	75	9.8%	
Valid N	126	126	126	126	126	126	126	126	126	126	126	126	

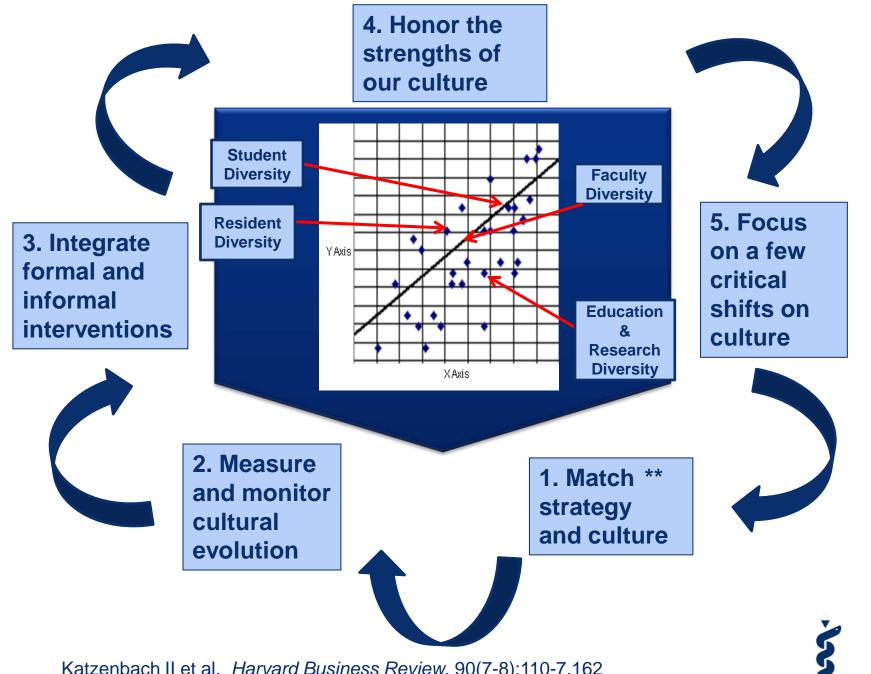
Note: The percentile distributions include reported zero values but exclude missing values.

Source: AAMC Student Records System; AAMC Faculty Roster

Staff Contact: For general report questions, contact Henry Sondheimer, M.D., at hsondheimer@aamc.org. For the data contributors to this table, see the definitions section of the report (pages 5 through 10).

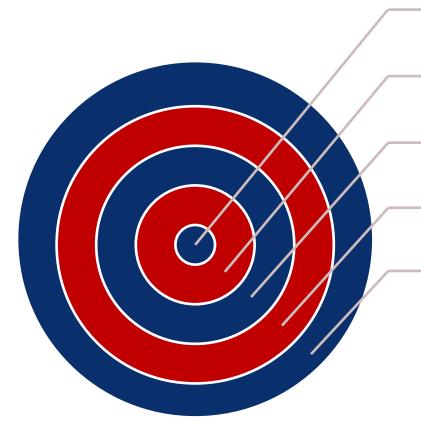




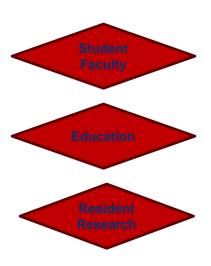


Katzenbach II et al. Harvard Business Review, 90(7-8):110-7,162

# **Achieving a Culture of Inclusion**



Culture of Inclusion Intentional Inclusion Transition State Diversity Awareness Pre-Awareness





### **'New Beginnings' Strategic Plan** Vision for Education and Diversity

#### **Goal #3 Education**

"Develop innovations in education to prepare students and trainees from diverse backgrounds to be collaborative practitioners of medicine, educators and researchers with a focus on the health of underserved and vulnerable populations."

#### **Select Strategies from Research and Education:**

- 2. Incorporate longitudinal service learning experiences in the curriculum with a focus on underserved and vulnerable populations.
- 3. Establish an Institute of Urban Health and Research focusing on patientcentered outcomes, comparative effectiveness, health services and translational research in diseases and injuries affecting urban populations.
- 5. Support programs to develop future talented and diverse students in the sciences through our relationships with K-12 institutions, undergraduate programs, and other medical schools.
- 7. Recruit, develop, and retain a diverse faculty in order to maintain an optimal learning environment.



# Establish Urgency: LCME

- **Clear Message sent**
- **Created Work Groups** 
  - Created a Vision
  - Communicated the Vision
  - Empowered to Act on Vision
- **Created Short Term Wins** 
  - Diversity viewed as strength by LCME
  - Gather the gains and produce further change
     Institutionalize the Change

Kotter JP. Harvard Business Review. January 2007





### **Questions and Answers**



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# **Closing Remarks**



#### David A. Acosta, M.D., FAAFP

Chair, AAMC Group on Diversity and Inclusion Chief Diversity Officer, Office of the Dean Director, Center for Equity, Diversity and Inclusion Clinical Professor, Department of Family Medicine University of Washington School of Medicine



### **\*\*Suggested Readings**

The framework for diversity and inclusion – institutional integration, accountability

• Smith DG. Diversity's Promise for Higher Education: Making it Work

#### Making the business case for diversity

- Ross HJ. Re-Inventing Diversity: Transforming Organizational Community to Strengthen People, Purpose, and Performance
- Liswood L. The Loudest Duck: Moving Beyond Diversity While Embracing Differences to Achieve Success at Work
- Wilson T. Diversity at Work: The Business Case for Equity

#### Diversity leads to excellence and innovation

• Page SE. The Difference: How the Power of Diversity Creates Better Groups, Firms, Schools, and Societies



### **\*\*Suggested Readings**

#### Change readiness and management, accountability

- Conners R, Smith T. Change the Culture, Change the Game: The Breakthrough Strategy for Energizing Your Organization and Creating Accountability for Results
- Heath C, Heath D. Switch: How to Change Things When Change is Hard

#### **Difficult conversations & confrontational skills**

- Patterson K, Grenny J, et al. Crucial Conversations: Tools for Talking When Stakes Are High
- Patterson K, Grenny J, et al. Crucial Confrontations: Tools for Resolving Broken Promises, Violated Expectations, and Bad Behavior

#### How to influence people

- Sjodin TL. Small Message, Big Impact: The Elevator Speech Effect
- Patterson K, Grenny J, et al. Influencer: The Power to Change Anything









# See you in Toronto! May 16-19, 2013 Fairmont Royal York Hotel



### **Contact Information**



Wanda D. Lipscomb, Ph.D.

Chair, Group on Student Affairs Committee on Diversity Affairs <u>Wanda.Lipscomb@chm.msu.edu</u>

David A. Acosta, M.D., FAAFP Chair, Group on Diversity and Inclusion dacosta@u.washington.edu

Maria L. Soto-Greene, M.D. Past-chair, Group on Diversity and Inclusion sotogrml@umdnj.edu

Marc A. Nivet, Ed.D. Chief Diversity Officer chiefdiversity@aamc.org





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