Increasing Program Diversity: Recruiting to Make a Difference

Monday, March 19, 2018
Kelly Spielmann, MS, C-TAGME
Karen Friedman, MD, FACP
Johanna Martinez, MD, MS
Nichol Martinez, MD
Matthew Sinclair, MD
Disclosures

No conflicts of interest to report
Welcome!!
Objectives

- Define diversity
- Recognize the benefits of diversity
- Identify strategies to increase diversity in your residency program
When you think of diversity, what comes to mind?
Diversity
Our Goal

Create a mixed workforce that provides a wide range of abilities, experience, knowledge, and strengths due to its heterogeneity
IT'S TIME TO PLAY
Benefits of Diversity in Healthcare
Congratulations

You’re the

WINNER!

Northwell Health

DONALD AND BARBARA
ZUCKER SCHOOL OF MEDICINE
AT HOFSTRA/NORTHWELL
Why is Diversity Important?

Achieve Institutional Excellence:
- Patient Outcomes
- Benefit to Learners
- Institutional Excellence
Health Disparities exist in all of our patient population

Physician-Patient language and racial / ethnic concordance makes a difference

Quality Care = Culturally Competent Care
Added Educational Values

Intellectual and Cognitive Benefits:

1. Assumptions challenged
2. Perspectives broadened
3. More balanced exchange of information
4. Enhanced multicultural socialization

Strategies to Increase Diversity
Diverse interviewers... Express clear commitment... Know Benchmarks... Multiple points of contact... Holistic Review of application... Outreach to Med School... Establishing Pipeline... Diverse Selection Committee... Structured interviews... Review Policies related to Diversity...
Congratulations

You’re the

WINNER!
Strategies

- Pre-interview
  - Mission and Vision Statement
  - Interview Committee
  - Holistic Review
  - AAMC Medical School Data
  - Outreach

- Interview
  - Exposure to Faculty and Residents
  - Faculty and Resident Awareness
  - Structured Interviews
Strategies

- Post Interview
  - Post interview follow-up
  - Second look
  - Post Match Survey
  - Evaluation of Diversity Initiatives
  - Assess your program
Pre-Interview Strategies
Mission and Vision Statement

- Express a clear commitment to the benefits of diversity as a priority
- State the benefits associated with a diverse residency, faculty, and staff
- Convey commitment to adequate URM representation among residency, department, and institutional faculty


Interview Committee

- Membership should support the commitment to diversity
- Include a diverse group of members
- Should have a clear understanding of the program’s diversity goals


Holistic Review

The AAMC defines holistic review as a flexible, individualized way of assessing an applicant’s capabilities by which balanced consideration is given to experiences, attributes, and academic metrics and, when considered in combination, how the individual might contribute value as a medical student and physician.
AAMC Experiences-Attributes-Metrics Model

# AAMC US Medical School Race/Ethnicity Data

## Table 8-5: Total Enrollment by U.S. Medical School and Race/Ethnicity, 2016-2017

The table below displays the racial and ethnic characteristics of enrolled students in U.S. medical schools for 2016-2017. **Enrollment** includes the number of students in medical school, including students on leave of absence, on October 31 of each year shown. Enrollment does not include students with graduated, dismissed, withdrawn, deceased, never enrolled, completed fifth pathway, did not complete fifth pathway, or degree revoked status. The **Multiple Race/Ethnicity** category includes those who selected more than one race/ethnicity response. Please email us at datarequests@aamc.org if you need further assistance or have additional inquiries.

<table>
<thead>
<tr>
<th>State</th>
<th>Total Enrollment</th>
<th>American Indian or Alaska Native</th>
<th>Asian</th>
<th>Black or African American</th>
<th>Hispanic, Latino, or of Spanish Origin</th>
<th>Native Hawaiian or Other Pacific Islander</th>
<th>White</th>
<th>Other</th>
<th>Multiple Race/Ethnicity</th>
<th>Unknown Race/Ethnicity</th>
<th>Non-U.S. Citizen and Non-Permanent Resident</th>
<th>Total Enrollment</th>
</tr>
</thead>
<tbody>
<tr>
<td>AL</td>
<td>Medical School</td>
<td>6</td>
<td>95</td>
<td>33</td>
<td>8</td>
<td>0</td>
<td>585</td>
<td>12</td>
<td>44</td>
<td>7</td>
<td>1</td>
<td>793</td>
</tr>
<tr>
<td>AR</td>
<td>Alabama</td>
<td>1</td>
<td>34</td>
<td>29</td>
<td>2</td>
<td>0</td>
<td>219</td>
<td>7</td>
<td>10</td>
<td>1</td>
<td>0</td>
<td>303</td>
</tr>
<tr>
<td>AR</td>
<td>Arkansas</td>
<td>2</td>
<td>59</td>
<td>27</td>
<td>17</td>
<td>2</td>
<td>506</td>
<td>6</td>
<td>28</td>
<td>5</td>
<td>0</td>
<td>702</td>
</tr>
<tr>
<td>AZ</td>
<td>Arizona</td>
<td>9</td>
<td>90</td>
<td>14</td>
<td>56</td>
<td>0</td>
<td>264</td>
<td>22</td>
<td>52</td>
<td>9</td>
<td>1</td>
<td>517</td>
</tr>
<tr>
<td>CA</td>
<td>Medical School</td>
<td>1</td>
<td>63</td>
<td>9</td>
<td>25</td>
<td>0</td>
<td>180</td>
<td>16</td>
<td>30</td>
<td>2</td>
<td>0</td>
<td>326</td>
</tr>
<tr>
<td>CA</td>
<td>California Northstate</td>
<td>5</td>
<td>64</td>
<td>7</td>
<td>3</td>
<td>0</td>
<td>51</td>
<td>8</td>
<td>55</td>
<td>0</td>
<td>8</td>
<td>150</td>
</tr>
<tr>
<td>CA</td>
<td>Los Angeles</td>
<td>0</td>
<td>200</td>
<td>50</td>
<td>45</td>
<td>1</td>
<td>271</td>
<td>8</td>
<td>80</td>
<td>6</td>
<td>60</td>
<td>721</td>
</tr>
<tr>
<td>CA</td>
<td>Southern Cal-Kenn</td>
<td>0</td>
<td>308</td>
<td>42</td>
<td>61</td>
<td>1</td>
<td>272</td>
<td>29</td>
<td>59</td>
<td>29</td>
<td>2</td>
<td>808</td>
</tr>
<tr>
<td>CT</td>
<td>Stanford</td>
<td>1</td>
<td>180</td>
<td>30</td>
<td>31</td>
<td>1</td>
<td>160</td>
<td>11</td>
<td>45</td>
<td>13</td>
<td>19</td>
<td>491</td>
</tr>
<tr>
<td>CT</td>
<td>UC Berkeley/SF Joint Prog</td>
<td>0</td>
<td>17</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>36</td>
<td>0</td>
<td>11</td>
<td>0</td>
<td>0</td>
<td>48</td>
</tr>
<tr>
<td>DC</td>
<td>Howard</td>
<td>2</td>
<td>139</td>
<td>30</td>
<td>98</td>
<td>1</td>
<td>129</td>
<td>77</td>
<td>48</td>
<td>11</td>
<td>2</td>
<td>466</td>
</tr>
<tr>
<td>DC</td>
<td>George Washington</td>
<td>1</td>
<td>149</td>
<td>12</td>
<td>48</td>
<td>1</td>
<td>172</td>
<td>25</td>
<td>61</td>
<td>11</td>
<td>2</td>
<td>481</td>
</tr>
<tr>
<td>FL</td>
<td>Medical School</td>
<td>1</td>
<td>254</td>
<td>49</td>
<td>77</td>
<td>0</td>
<td>218</td>
<td>23</td>
<td>75</td>
<td>19</td>
<td>9</td>
<td>722</td>
</tr>
<tr>
<td>FL</td>
<td>UF-Walsh</td>
<td>2</td>
<td>117</td>
<td>18</td>
<td>55</td>
<td>2</td>
<td>459</td>
<td>16</td>
<td>124</td>
<td>9</td>
<td>2</td>
<td>786</td>
</tr>
<tr>
<td>FL</td>
<td>Medical School</td>
<td>0</td>
<td>81</td>
<td>43</td>
<td>33</td>
<td>0</td>
<td>244</td>
<td>7</td>
<td>31</td>
<td>7</td>
<td>2</td>
<td>430</td>
</tr>
<tr>
<td>FL</td>
<td>Florida Atlantic-Schmidt</td>
<td>0</td>
<td>74</td>
<td>18</td>
<td>10</td>
<td>1</td>
<td>179</td>
<td>18</td>
<td>23</td>
<td>6</td>
<td>0</td>
<td>329</td>
</tr>
<tr>
<td>FL</td>
<td>Florida Atlantic-Schmidt</td>
<td>0</td>
<td>160</td>
<td>48</td>
<td>19</td>
<td>2</td>
<td>184</td>
<td>10</td>
<td>53</td>
<td>16</td>
<td>57</td>
<td>549</td>
</tr>
<tr>
<td>FL</td>
<td>Medical School</td>
<td>0</td>
<td>114</td>
<td>46</td>
<td>18</td>
<td>1</td>
<td>511</td>
<td>18</td>
<td>49</td>
<td>18</td>
<td>14</td>
<td>830</td>
</tr>
<tr>
<td>FL</td>
<td>Medical School</td>
<td>1</td>
<td>66</td>
<td>29</td>
<td>28</td>
<td>0</td>
<td>258</td>
<td>18</td>
<td>42</td>
<td>3</td>
<td>2</td>
<td>306</td>
</tr>
<tr>
<td>FL</td>
<td>Florida</td>
<td>0</td>
<td>90</td>
<td>32</td>
<td>122</td>
<td>0</td>
<td>154</td>
<td>18</td>
<td>75</td>
<td>8</td>
<td>0</td>
<td>484</td>
</tr>
<tr>
<td>FL</td>
<td>Florida</td>
<td>0</td>
<td>69</td>
<td>52</td>
<td>18</td>
<td>0</td>
<td>346</td>
<td>14</td>
<td>62</td>
<td>3</td>
<td>2</td>
<td>569</td>
</tr>
<tr>
<td>FL</td>
<td>Florida</td>
<td>0</td>
<td>32</td>
<td>18</td>
<td>70</td>
<td>0</td>
<td>158</td>
<td>8</td>
<td>22</td>
<td>2</td>
<td>0</td>
<td>260</td>
</tr>
<tr>
<td>FL</td>
<td>Florida</td>
<td>0</td>
<td>50</td>
<td>50</td>
<td>57</td>
<td>0</td>
<td>268</td>
<td>10</td>
<td>37</td>
<td>6</td>
<td>0</td>
<td>456</td>
</tr>
<tr>
<td>FL</td>
<td>Miami-Miller</td>
<td>0</td>
<td>209</td>
<td>49</td>
<td>64</td>
<td>1</td>
<td>418</td>
<td>24</td>
<td>65</td>
<td>14</td>
<td>8</td>
<td>882</td>
</tr>
</tbody>
</table>
Outreach to URM Medical Students

- Interact with relevant existing medical school programs (ex. Office of Diversity Inclusion and Outreach).
- Coordinate with pertinent medical student groups (ex. Student National Medical Association and Latino Medical Student Organization)


Latino Medical Student Association (LMSA): https://lmsa.site-ym.com/: was founded to represent, support, educate and unify Latin American medical students in the U.S. Now more than 30 years in existence, the organization works to eliminate health disparities, educate medical students on Latino health issues and advocate for rights of Latinos in the health care system. LMSA leaders also work closely with the National Hispanic Medical Association.

Association of American Indian Physicians (AAIP): https://www.aaip.org/about/mission/: The Association of American Indian Physicians was established to improve the health of American Indian and Alaska Natives in part by promoting education in the medical disciplines. The organization supports students through information on scholarships, internships, and fellowships for Native American and Alaska Natives.

The Student National Medical Association (SNMA): http://www.snma.org/: SNMA is the nation's oldest and largest independent, student-run organization focused on the needs and concerns of medical students of color. SNMA is dedicated to ensuring culturally-sensitive medical education and services, as well as increasing the number of African American, Latino and other students of color entering and completing medical school.
Exposure to URM and Non-URM Faculty and Residents

- Carefully review URM applications making sure that interviewer-applicant are matched by their interests
  - Specialty
  - Medical School
  - Research areas of interest
- Identify relevant faculty for residency applicant interviews
- Provide applicants with summary of relevant training opportunities, residents, and faculty, including contact information

Faculty and Resident Awareness

- Ensure that faculty and residents are aware of diversity initiatives taking place in the program and health system
  - Diversity Committee
  - Recruitment efforts
  - Didactics/Cultural Competence Curriculum

- Make sure that faculty are able to answer applicant questions honestly

- Current resident URM information
- Faculty URM information
Structured Interviews

- Increasing standardization of the interview content and evaluation is likely to reduce the impact of unconscious bias on the interview process.

- The impact of unconscious bias can be mitigated through defining criteria, using a scoring rubric.

- Provide faculty development course training to interviewers on proper technique.
Post Interview Strategies
Post Interview Follow-up

- Clearly express your interest
- Email applicants letting them know that they can contact you with any questions
- Have Chief Residents follow-up with applicants
- 2nd Look Day where applicants are able to interact with URM faculty and residents

Second Look

Diversity Second Look

Sunday, January 29, 2017
10:30am - 1:00pm
Hofstra Northwell School of Medicine
500 Hofstra University, Hempstead, NY 11549

Program Agenda
10-11am: Highlight of Diversity Activities
11-12pm: Residency Program Specific Overviews and Resident Panel

- Internal Medicine
- Emergency Medicine
- Pediatrics

12-1pm: Informal Networking Session (light breakfast and lunch will be provided)

Dear Applicant,

We are excited to invite you back to Northwell Health for our Diversity Second Look!

We at Northwell Health, continually strive to recruit the best and brightest applicants and also understand the importance of applicants choosing the right residency program for themselves. We fully acknowledge that having a diverse residency community positively impacts our patients, learners, and the academic institution. That is why we assure you of Northwell Health’s firm commitment to diversity at all levels. The Diversity Second Look is just one example of this commitment.

We are inviting residents from under-represented minority (URM) backgrounds in the fields of Emergency Medicine, Internal Medicine, and Pediatrics to join us on this Second Look.
Post Match Survey

- Survey URM applicants that matched at other programs
  - Keep the survey short and simple
  - Ask which factors were most important to them when making their rank list
  - Ask if there is something that they would change about the interview experience
- Use this information to make changes to next year’s process
Evaluation of Diversity Initiatives

- Create a process to review relevant policies, and effectiveness of implementation
- Identify and address areas where goals are not being met
- Debrief with everyone involved in the process and discuss what worked and what didn’t

Assess Your Program

- Keep track of your numbers
  - URM applicants applied
  - URM applicants invited
  - URM applicants interviewed
  - URM applicants ranked
  - URM applicants ranked to match
  - URM applicants that matched to program
Workshop Action Items

TO DO

1.
2.
3.
4.
Contact Information

Kelly Spielmann, MS, C-TAGME
kspielmann@northwell.edu

Karen Friedman, MD, FACP
kfriedma@northwell.edu

Johanna Martinez, MD, MS
jmartine17@northwell.edu

Nichol Martinez, MD
nmartinez12@northwell.edu

Matthew Sinclair, MD
msinclair@northwell.edu
Patients
U.S. Population Will Become Increasingly Diverse

- Hispanic Origin
- Asian, Native Hawaiian, and Pacific Islander
- Two or More Races
- Black
- American Indian and Alaska Native
- White

<table>
<thead>
<tr>
<th>2013</th>
<th>US Population (US Census Data)</th>
<th>US Physician Workforce (AAMC facts/figures)</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>63%</td>
<td>43.0%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>16.9%</td>
<td>4.0%</td>
</tr>
<tr>
<td>Asian/NH/PI</td>
<td>5.1%</td>
<td>10.9%</td>
</tr>
<tr>
<td>Black</td>
<td>13.1%</td>
<td>3.7%</td>
</tr>
<tr>
<td>American Indian/AN</td>
<td>1.2%</td>
<td>0.3%</td>
</tr>
<tr>
<td>Other</td>
<td>2.4%</td>
<td>37.7%</td>
</tr>
</tbody>
</table>

Blacks and African-Americans comprise only 4 percent of the physician workforce.
Our Communities: AAMC

Diversity should be a core value in the health professions. Health professions schools should ensure that their mission statements reflect a social contract with the community and a commitment to diversity among their students, faculty, staff, and administration.
Learner/Trainee
Diversity Requirements

Liaison Committee on Medical Education (LCME):

3.3 Diversity/Pipeline Programs and Partnerships: Diversity in the learning environment

“A medical school has effective policies and practices in place and engages in ongoing, systematic, and focused recruitment and retention activities, to achieve mission-appropriate diversity outcomes among its students, faculty, senior administrative staff, and other relevant members of its academic community.”

7.6 Cultural Competence/Health Care Disparities/Personal Bias

“The medical curriculum provides opportunities for medical students to learn to recognize and appropriately address gender and cultural biases in themselves, in others, and in the health care delivery process.
Diversity Requirements

Accreditation Council for Graduate Medical Education (ACGME):
Residents are expected to communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds (IV.A.5.d.1).

Residents must demonstrate a commitment to carrying out professional responsibilities and adherence to ethical principles (IV.A.5.e.).

Residents are expected to demonstrate compassion, integrity, and respect for others; responsiveness to patient needs that supersedes self-interest; respect for patient privacy and autonomy; accountability to patients, society, and the profession; and sensitivity and responsiveness to a diverse patient population, including, but not limited to, diversity in gender, age, culture, race, religion, disabilities, and sexual orientation (IV.A.5.e.1-5).
Strategies