

ABSTRACT: 2014 ELAM Institutional Action Project Poster Symposium

Project Title: Weaving Diversity through the Academe: A Case Study at Northwestern University

Name and Institution: Melissa Andrea Simon, MD MPH, Feinberg School of Medicine, Northwestern University

Collaborators: Eric G. Neilson, MD, Dean Feinberg School of Medicine, senior leadership, faculty, trainees, students and staff input

Background, Challenge or Opportunity: It is commonly accepted that diversity and inclusion is an integral core component of creating a more collaborative, productive and successful environment. However, the operationalization of diversity and inclusion efforts in academic health centers widely varies. Within health care and medical education, there are emerging best practice examples.

At Northwestern University Feinberg School of Medicine and the newly integrated Northwestern Medicine, as in many academic health centers and schools, we have experienced the ebb and flow of d and I efforts. There are solid and thriving programs nested amongst the sea of substrate and opportunity to advance diversity and inclusion as it is a key element of the Northwestern University strategic plan. With the alignment of Northwestern Medicine and the new medical school curriculum, we have an unfettered opportunity to 1) categorize current efforts in diversity and inclusion; 2) have a thoughtful dialogue of experience, possibility and goals; and 3) use these data to inform action.

Purpose/Objectives: The overarching goal is to respond to the organizational and school need and desire to achieve true collaboration and innovation that is best formed when there are diverse and inclusive lenses weaved throughout.

Approach: This IAP will be accomplished in phases.

Phase 1: To document best practices across the country in diversity and inclusion and to examine their numbers to the extent available in terms of diversity and inclusion at the student and faculty levels. To take stock of all of the diversity initiatives scattered throughout the medical school and university.

Phase 2: To host a series of thoughtful conversations across a wide range of students, trainees, faculty and leaders at Northwestern Medicine and Feinberg School of Medicine.

Phase 3: One intended outcome of this IAP is to articulate these efforts around a mission statement, job description for the vice dean position, a draft plan and to create a movement towards more integration of diversity throughout the medical school but also connected to the efforts across the university.

Outcomes: Data will be presented on phase 1 and phase 2. The overall mission is to move from a deficit model of diversity plans within the university (meaning having diversity be addressed purely through a committee on diversity and office of multicultural affairs and then having a few scattered programs sprinkled around the university to address diversity in a non unified way)... TO a true centralization of diversity across the medical school and health system- where diversity is truly weaved into the fabric of what we do rather than an "ad hoc", or "on a need to address basis".

Melissa Andrea Simon, MD MPH

Departments of Obstetrics and Gynecology, Preventive Medicine, and Medical Social Sciences
Collaborator: Dr. Eric G. Neilson, Dean Feinberg School of Medicine at Northwestern University

BACKGROUND

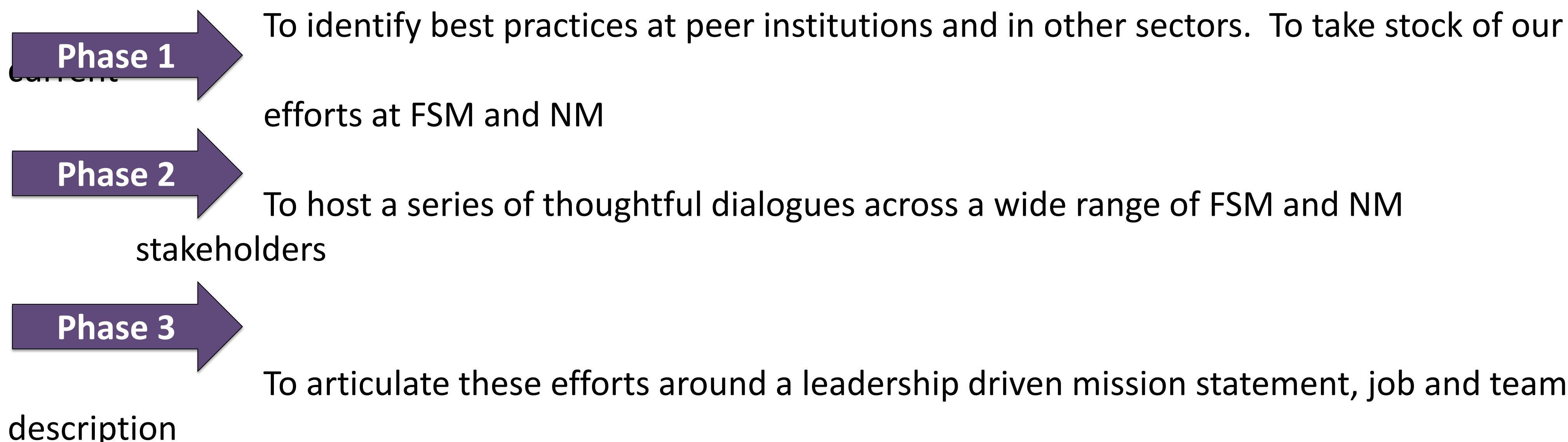
- It is commonly accepted that diversity and inclusion (D and I) is an integral core component of creating a more collaborative, productive, innovative and overall successful organization
- Challenge:** Operationalization of D and I efforts in academic health centers widely varies and ebb and flow with leadership change.
- Opportunity:** Northwestern Medicine (NM) has just integrated and there has just been major curricular change at Feinberg School of Medicine (FSM) and there is much forward momentum for positive change in all mission spheres.

OBJECTIVE

- To respond to NM and FSM need and desire to achieve true collaboration and innovation that is best created when D and I efforts are weaved into the institutional fabric.

APPROACH

- To meet this lofty goal, this project required phased planning and unveiling.



Presented at the 2014 ELAM Leaders Forum for what a D and I team at NM and FSM should look like, and a draft plan of possibilities to create a

APPROACH AND OUTCOMES

Thoughtful Dialogue

- Between January and April, we conducted a series of 54 thoughtful conversations regarding D and I. Stakeholders included faculty, trainees, students, staff and leaders in various departments and functions across FSM and NM.
- Areas of inquiry included:
 - Perceived D and I climate, culture and need
 - Areas where D and I efforts are thriving
 - Opportunities to improve D and I efforts
 - Use of metrics to promote D and I
 - Other considerations

Cataloguing Diversity and Inclusion Efforts

- There are several thriving programs at NM and FSM that help support D and I efforts mostly focused on students and residents these programs need more support and application
- There are weak efforts aimed at faculty, fellows and patient care and many opportunities to address this.

Excerpts from the Dialogue

<i>Participants</i>	<ul style="list-style-type: none"> 54 conversations with leaders, faculty, trainees, students and staff
<i>Unanimous Select Responses</i>	<ul style="list-style-type: none"> Unanimously positive response in support of the need for more intentional and public D and I efforts and support Unanimous statement that D and I efforts need to be promoted, elevated and amplified through senior leadership in an ongoing rather than sporadic way It is going to take strong resources It is going to take a full complementary team across NM and FSM to accomplish true integration of D and I efforts

DISCUSSION AND NEXT STEPS

SUMMARY

WILL + RESOURCE are required. A TEAM is Required.

- Addressing D and I intentionally is critical in today's medical schools and health care organizations. It is only through intentionality and true support with demonstrated will and resource from leadership that will champion D and I and thus help weave it into the fabric of the institution.
- There are pockets of D and I excellence scattered throughout FSM and NM. Much effort is focused on medical students with attention to trainees second.
- There are opportunities to better address D and I as it relates to patient care and, cultural competency and fellows and faculty

IMPACT

- This dialogue has made it clear that there is will to help propel these efforts in multiple dimensions across NM and FSM.

NEXT STEPS To articulate this will and coalesce an implementation team with resource and direct report to top leadership at FSM and NM