

WIN WHEN PLAYBOOK



EQUALITY is the *outcome*
EQUITY is the *process*

61%

of ALL corporate
employees have
seen racism at
work

~~Does Race
Matter?~~

**Does Racism
Matter?**

**DISMANTLING
CORPORATE
STIGMA**





**“DIVERSITY WITHOUT INCLUSION IS SIMPLY
DECORATION. LET’S SHIFT THE CULTURE.”**

- Dr. Kevin Ahmaad Jenkins

EQUITY COACHING CLINIC TOPICS

Part One: Opening Keynote - A New Referee for DE&I Implementation

Wed, Jun 30, 11am-12:15pm (ET)

Part Two: Equitable Conversations

Wed, Jul 14, 11am-12:15pm (ET)

Part Three: Equitable Messaging

Wed, Jul 28, 11am-12:15pm (ET)

Part Four: Equitable Partnership Building

Wed, Aug 11, 11am-12:15pm (ET)

Part Five: Diversity Pipeline Development

Tues, Aug 31, 11am-12:15pm (ET)



Resource Guide.....2

Coaching Clinic Sessions.....3-6

- Diversity Pipeline Development
- Equitable Conversations
- Equitable Measurement
- Equitable Partnership Building

Case Studies.....7-11

- Taylor Oliver
- Hurley Medical Center

RESOURCE GUIDE

Adding these Key Terms to your vocabulary strengthens your organization's ability to recognize the signs of inequity and craft evidence based solutions to bring equity to action.

Equity

A process not an outcome that rectifies unfairness and addresses historical exclusion to achieve a level playing field

Inclusion

Considers, collaborates, and engages the voices of diverse groups of people within the decision-making process of an organization

Access

Reflects a continuum of 7 perspectives that appraises challenges to resource procurement



Diversity

Focuses on representation and visibility of underrepresented groups within organizations and offers an opportunity for mutual learning and growth

Narratives of Disparity

Anecdotes that reveal the consequences of prejudice and provide a glimpse into a lived experience other than our own

DIVERSITY PIPELINE DEVELOPMENT

Every organization wants to increase diversity, but they often struggle with how to execute an effective strategy.

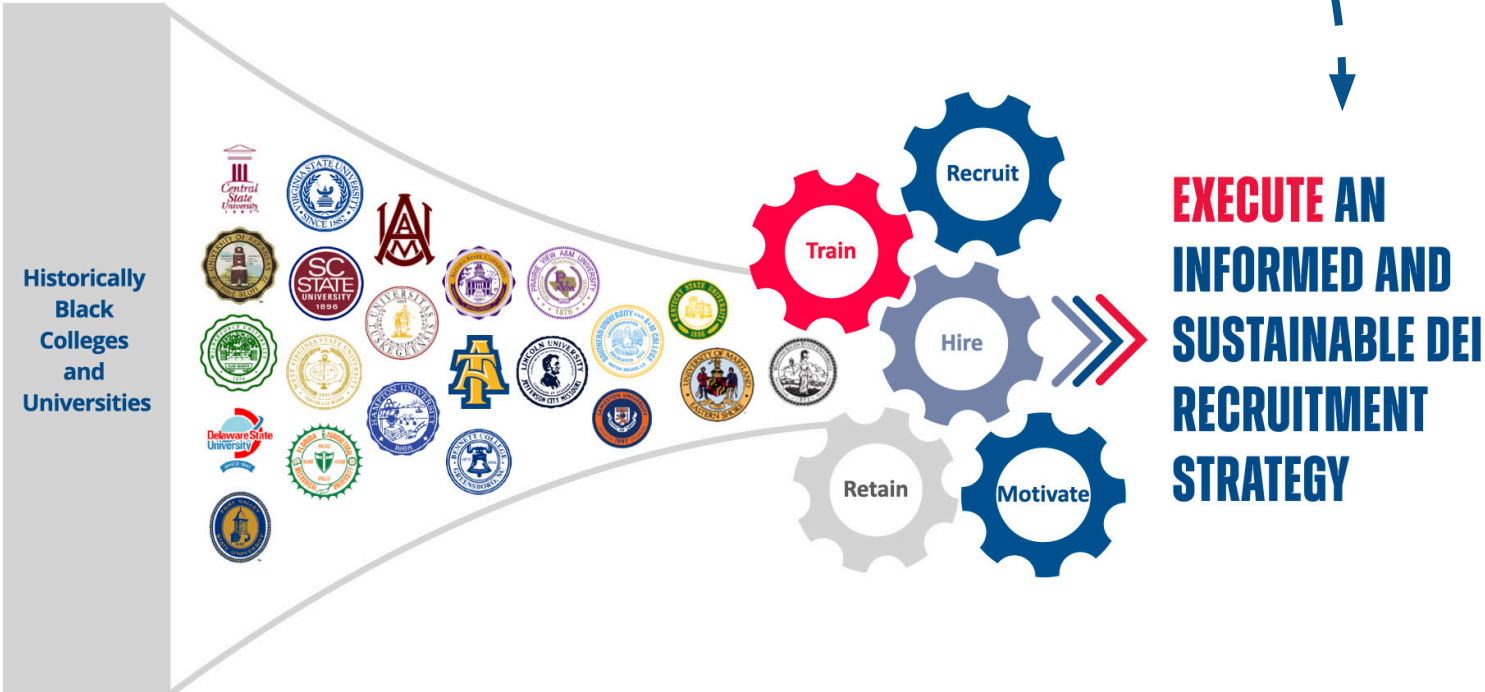
This session guides participants through effective underrepresented minority pipeline development.

- Objectives**
- Where do you find qualified black and brown candidates?
 - Understand the history and present reality of Historically Black Colleges and Universities (HBCUs), Hispanic-Serving Institutions (HSIs), and other minority serving institutions
 - How to build relationships and partnerships with minority serving institutions

- Concepts & Key Takeaways**
- Affinity groups
 - Understand who you are working with and how to work with them
 - Make an investment
 - Decision maker vs. Gate Keeper
 - Social network vs. influence
 - Recruit, Train, Hire, Retain, Motivate
 - Rationale to diversify must meet your strategy for inclusion

INTERACTIVE APPLICATION

- Research an HBCU, HSI, or minority serving institution
- Design map where, who, and how you would work with



EQUITABLE CONVERSATIONS

As DEI approaches continue to expand within a 21st century cultural framework, this workshop directly confronts internal scenarios that routinely surface during DEI strategy adoption

We interactively train executives and leaders on how to engage your managers & teams at every phase of DEI strategy implementation.

- Objectives

 - Reimagine how to hold conversations
 - Understand how to handle vulnerability and what to do
 - Gain tools to engage in equitable communications with both colleagues and superiors
- Concepts & Key Takeaways

 - Systematize equitable 1:1 meetings
 - DEI Meeting frameworks
 - Power through stigma creating a plan of shared experiences
 - The Diversity Dilemma
 - Meet colleagues where they are at: Unbothered, Unaware, Ally, Affected
 - Tangerine: Understand nonverbal communication
- Interactive Applications

 - Equity Do-Over! An opportunity to reflect and revamp the way we communicate with each other

POWERING THROUGH STIGMA

Create a plan of shared experiences.

- Brainstorm 5 minutes to find 12 activities that will bring your team together
- 12 things to do = 12 month plan of curated shared experiences unique for your organizations



Netflix & Build



Podcasts



Audiobooks



Books

1. WHAT MAKES YOU FEEL AFFIRMED AT WORK?

2. WHICH OF YOUR SKILLS ARE CURRENTLY UNDERUTILIZED?

3. WHEN DID YOU HAVE TO USE YOUR STRENGTH IN THE WORKPLACE?



EQUITABLE MESSAGING

External conversations that reset advertising, earned media, and business to business relationships remain key to authentically embracing your DEI approach.

We help healthcare leaders identify emotions and execution of externally-facing DEI opportunities.

- Objectives**
- Understand key values at the core of your organization’s mission as a foundation for authentic messaging.
 - Learn how to say “We heard you” and explain how it reshaped your business.

- Concepts & Key Takeaways**
- Veneer of Concern
 - Developing and vetting a message from a vulnerable community’s perspective
 - Lack of accountability threatens your authenticity

- Interactive Applications**
- Vet That! Interactive Poll Questions
 - Cinematic Scavenger Hunt





INTERACTIVE APPLICATION: CINEMATIC SCAVENGER HUNT

- Using blockbuster movies or favorite television shows, we go on a cinematic scavenger hunt to best understand the art of Equitable Messaging in external engagement.



EQUITABLE PARTNERSHIP BUILDING

Sustainable DEI approaches require strategic social partnerships that can protect your organizational vulnerabilities and bolster your long-term goals.

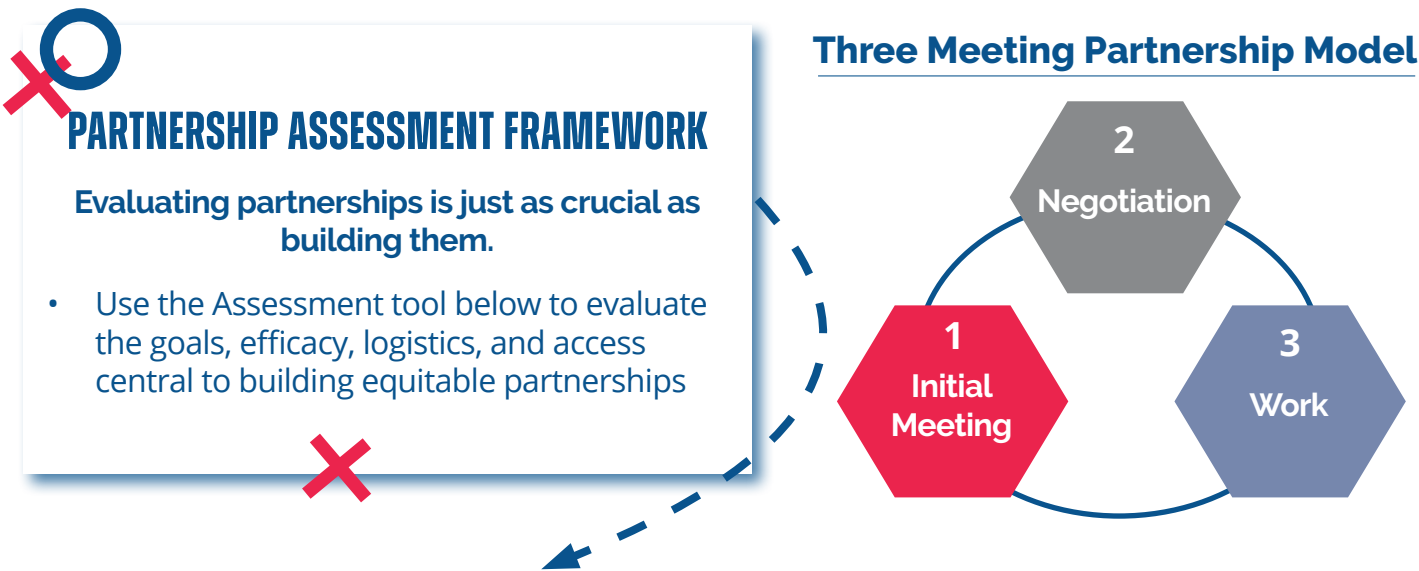
These sessions take executives through the Win When Partnership Assessment Framework and educates on how to identify and nurture non-traditional partnership.

- Objectives

 - Understand the alignment between each organization’s mission and vision for equity
 - Value partnership through accountability structure
 - Learn tools to develop foundations and long lasting partnerships
- Concepts & Key Takeaways

 - Align with non-traditional people
 - Align with Black organizations
 - Engage partnership objective
 - Develop an accountability structure
 - How to create seats at the table: value affiliate programs and create strong organizational ties
- Interactive Applications

 - Partnership Assessment Framework: Evaluate partnership Metrics, Cost, Scale, Access, Team and Priority



Key Metrics	Cost	Scale	Access	Team	Priority
<div><div></div><div></div><div></div><div></div></div>	<div><input type="checkbox"/> Low</div> <div><input type="checkbox"/> Medium</div> <div><input type="checkbox"/> High</div>	<div><input type="checkbox"/> Internal</div> <div><input type="checkbox"/> Business to Business</div> <div><input type="checkbox"/> Business to Consumer</div> <div><input type="checkbox"/> Business to Community</div>	<div><input type="checkbox"/> Affordability</div> <div><input type="checkbox"/> Accessibility</div> <div><input type="checkbox"/> Availability</div> <div><input type="checkbox"/> Accommodation</div> <div><input type="checkbox"/> Acceptability</div> <div><input type="checkbox"/> Awareness</div> <div><input type="checkbox"/> Accountability</div>	<div><div></div></div>	<div><input type="checkbox"/> Low</div> <div><input type="checkbox"/> Medium</div> <div><input type="checkbox"/> High</div>



CASE STUDY TAYLOR OLIVER

The case of Taylor Oliver in Lake Charles, Louisiana highlighted many intersections of inequality.

Taylor was born on September 5, 2000 in Lake Charles, Louisiana. She was extremely sick with repeat infections, persistent abdominal pain, nausea, and diarrhea. Susan Duhon, nurse practitioner, owned Magnolia Clinic. Ms. Duhon obtained her nursing certificate in 1974, subsequently; she obtained her certification as a Pediatric Nurse Practitioner in 1977. Current 2011 statutes require nurse practitioners to receive a bachelors and masters of science in nursing. Without any college-level training, Ms. Duhon was grandfathered in as a nurse practitioner. She was able to purchase medical malpractice insurance with Nurse Practitioner status and start the Magnolia Clinic. In accordance with Louisiana Medical Malpractice Act, Ms. Duhon is required to collaborate with a physician. Dr. Jeanette Bergstedt agreed to work Ms. Duhon for primary care matters.

On 32 occasions, Taylor's parents complained of frequent complications, and asked Ms. Duhon to consult a physician. Despite the legal requirement to refer the patients to the collaborating physician,

Ms. Duhon refused. The Oliver's saw no improvement and finally took Taylor to Women & Children's Hospital in Lake Charles where Dr. Bergstedt finally treated the child on to refer her to Texas Children's Hospital. Taylor was diagnosed with neuroblastoma, a childhood nerve tissue cancer.

When Taylor was just 15 months old, she was given the diagnosis of phase 4 neuroblastoma. This disease is perfectly treatable when caught before a child turns 12 months old. Despite extensive chemotherapy, Taylor was not expected to live to see her second birthday. But Taylor survived - even when the tumors grew and protruded out of her head disfiguring her face, threatening her sight and even brain development.

"On 32 occasions, Taylor's parents complained of frequent complications, and asked Ms. Duhon to consult a physician."

CASE STUDY TAYLOR OLIVER

continued

Experts suggested that this disease survived event-free if treated in the first year. Ms. Duhon's inaction failed to meet this threshold. A jury found Magnolia Clinic liable for the damages and awarded the Olivers \$6.233 million in damages. A trial judge later determined under the Louisiana state malpractice cap that \$500,000 was the lawful maximum. The Olivers appealed the decision arguing the medical malpractice cap protects health care providers who inflict severe damage.

Decision. The appellate court found that MMA law provided no intention to include or protect...

MS. DUHON'S INACTION FAILED TO MEET THIS THRESHOLD.

...Nurse Practitioners at the time of its passage or in the present context. The inclusion of Nurse Practitioners was "overly inclusive" according to the court. The defense argued the Olivers never argued the inclusiveness of the MMA, therefore, the court could not rule on that premise. As for the MMA damages cap, the judge highlighted the complications manifested by this cap, and felt its intent is very antiquated. The judge stated the legislature, not the court, should decide this issue and the court should honor the jury's initial decision to award the Olivers \$2.333 million. Affirmed in part and Reversed in part.





CASE STUDY TAYLOR OLIVER

THE CASE OF TAYLOR OLIVER IN LAKE CHARLES, LOUISIANA HIGHLIGHTED MANY INTERSECTIONS OF INEQUALITY.

One intersection involves issues with the **access to healthcare** that contributed to Taylor's untimely death.

- Consider the KHS approach to access and reflect on how patient access can be improved through the framework below:



In the outcome of the *Oliver v. Magnolia Clinic*, the Justice noted that the **poorly written law** should not be clarified by the Court.

- Consider how this case's decision can be used to specifically **train** health policy and law makers in equitable approaches to health policy competence?

Key Terms to Define

- Health
- Social Determinants of Health
- Iron Triangle
- Agenda Setting

FRACTURES IN THE HEALTHCARE SYSTEM

How has the American Medical Association shaped the way healthcare has been administered in the United States?



CASE STUDY HURLEY MEDICAL CENTER

The case of Hurley Medical Center's NICU Highlighted both legality and leadership issues.

On November 1, 2012, the patient assignment sheet notified nursing staff within Hurley Medical Center's Neo-Natal Intensive Care Unit (Hurley) stating, "Please no African American nurses to for [name redacted] baby per Dad's request Thank You." For the immediate safety of the staff, Hurley nurses reassigned the African American nurse who had been treating the man's daughter. The child's father,

Health and Human Services (OCR) and a full investigation ensued.

The federal funds that offset the tremendous cost of their case mix were in jeopardy due to a potential violation of Title VI of the Civil Rights Act of 1964, 42 U.S.C. §2000d and Title VII of the Civil Rights Act of 1964, 42 U.S.C. Sec. 2000e. Hurley is a public safety-net hospital that provides a large majority of Flint, Michigan's uncompensated care. Title VI states "No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance." Under OCR's compliance adherence standards section 3(a)b, staff delegation should not be dictated by race, color, or national origin of either patient or staff. "Similarly, the United States Equal Employment Opportunity Commission (EEOC) probed the case following the nurse's complaint against the hospital. The nurse alleged that reassignment based on the color of skin exhibited discriminatory practices. On both legal issues, OCR and EEOC found Hurley noncompliant.



brandished with swastika tattoos, made racist statements while explaining his prison background to the Hurley

staff. Health care providers also noticed a swastika tattoo on the father. The note disappeared from the patient's file after the hospital's general counsel review, but this happened after the African American nurse who had been treating the infant was reassigned. Media reports tipped off officials at the Office of Civil Rights within



CASE STUDY HURLEY MEDICAL CENTER

THE CASE OF HURLEY MEDICAL CENTER’S NICU HIGHLIGHTED BOTH LEGALITY AND LEADERSHIP ISSUES.

As a federally funded institution, this case **violated** multiple sections of the Civil Rights Act of 1964.

Title VI of the Civil Rights Act	Title VII of the Civil Rights Act
<ul style="list-style-type: none">• Forbade federally funded institutions to uphold discriminatory practices	<ul style="list-style-type: none">• Patient’s decision created a hostile work environment

The **fracture and failure** of hospital leadership set a dangerous precedent and damaged the entire organization’s support of every employee of color.

