PLANTING THE SEEDS FOR GREATER DIVERSITY, EQUITY AND INCLUSION at Children’s National Hospital

June 2020 – July 2021
In June 2020, the world watched in horror when police officers brutally restrained and killed George Floyd. This terrible event served as a critical moment for reflection and action on racial equity and inclusion efforts in the United States. At Children’s National Hospital, this tragedy catalyzed and expanded our ongoing efforts to ensure we are on the path toward becoming a more diverse, equitable and inclusive organization.

Our hospital has been on its own journey toward greater diversity, equity and inclusion since the early 2000s. Up to 2020, we focused on recruitment, academic advancement and leadership development of faculty members and trainees underrepresented in medicine.

This work has contributed to important milestones, including welcoming a 2021 residency class that is our most diverse class ever and more than three times the national average for diversity.

Our history of leading these efforts meant we were poised to expand our scope of work on diversity, equity and inclusion in the summer of 2020. With the wholehearted support of our President and CEO Dr. Kurt Newman and the Children’s National Board of Directors, today we are designing effective, data-driven and responsive programs that will lead to a more diverse, equitable and inclusive workplace and more importantly, will ensure the continued delivery of high quality health care services to all patients.

This is our first-ever Diversity, Equity and Inclusion Report. It begins to tell the story of our unwavering commitment to our patients, families and employees as well as outlines our journey ahead. We will discuss our accomplishments and our plans as we work together to advance equity and inclusion at Children’s National and across our communities.

This is not an easy path — developing initiatives and programs to reach the goal of equity and inclusion for all requires us to overcome centuries of pervasive racism, sexism and cultural and religious bias that have created functional, economic and structural barriers in society. But the dedication and passion that our teams continue to show in the face of these challenges give me confidence that we have the vision, resolve, knowledge and skills to advance this important body of work.

Denice Cora-Bramble, M.D., M.B.A.
HISTORY

Diversity & Inclusion at Children’s National

2020
- Second Healthcare Equality Index
- D&I program’s scope expanded to include all staff
- White Coats for Black Lives Ceremony
- Diversity and Inclusion Dialogue launch

2019 - 2020
- Quantitative data analysis of faculty members “stuck in rank” for 7 years or more & intervention

2019
- First Healthcare Equality Index & subsequent gap analysis
- Rising Leaders Program Launch

2018
- Created Interim Chief Diversity Officer for Faculty Affairs & Assoc. Physician Diversity Officer
- D&I Office launch

2016 - 2017
- Race & Gender Salary Equity Analysis & Adjustment
- Qualitative Study of Perceived Barriers of Academic Advancement of Minority Faculty
- Diversity & Inclusion Assessment by Association of American Medical Colleges (AAMC)

2004 - Present
- Minority Faculty Development Program Launch; subsequently featured by AAMC
Children’s National Hospital has advanced diversity, equity and inclusion efforts in pediatric medicine for more than two decades. In 2020, this work significantly expanded to include initiatives for creating a better, more equitable experience for patients, their families and all employees.

To ensure employee engagement as well as long-term sustainability, the Chief Diversity Officer issued a hospital-wide call for membership and developed an all-volunteer Diversity, Equity and Inclusion (DEI) Program committee structure, that leads this work according to the principles of data-driven goal setting and performance improvement. Hospital leaders and the DEI Committee used the last year to map out and begin programmatic activities that lay the groundwork for long-term success.

### 2020-2021 MILESTONES

#### Diversity and Inclusion Dialogues Raise New Voices

In the days after the murder of George Floyd, Children’s National leaders sought to connect with their staff, create safe space for open and difficult conversations about these challenging events. Weekly Diversity and Inclusion Dialogues were started to meet this need. These sessions continued but eventually became a monthly event. The hospital has held more than 20 sessions open to all staff. On average, sessions attract between 250 to 300 attendees each month, and peak attendance at a single session topped more than 700.

Topics for these dialogues have taken on a life of their own over the last year and now range from current events to public health-related equity issues. For example, as reports of anti-Asian American and Pacific Islander violence rose in early 2021, the dialogue session welcomed several Asian American employees from both clinical and non-clinical roles to share their lived experiences. The sessions seek to create a safe space for people to share their thoughts and reflections, spur introspection and make connections with others. Most sessions allot time for voluntary personal reflections from leaders, faculty and staff and facilitators make a specific effort to answer questions that arise during the meeting. The dialogues also provide an opportunity for the DEI Committee to share updates on the organization’s initiatives.

#### Diversity, Equity and Inclusion Baseline Survey Gives Key Insight

In January 2021, Children’s National launched the Diversity Engagement Survey, a 22-plus item, web-based, anonymous survey used by many other hospitals to assess, evaluate and benchmark institutional engagement and inclusion.

Nearly 40% of Children’s National employees completed the baseline assessment survey, a high response rate compared to the national average. Though a majority of employees ranked all 22 quantitative indicators favorably (4 or 5 out of 5), some areas for potential improvement were identified when responses were broken down by race and gender.

Indicators with more significant differences between different races and genders, including questions about compensation, bias and career advancement, became one of several data sources that helped to define target areas for intervention programs. Additional analysis of qualitative data from the survey is underway and will help fuel better understanding of the responses and the needs and perceptions of employees.
**DIVERSITY, EQUITY AND INCLUSION COMMITTEE STRUCTURE**

- **9 Subcommittees**
- **136+ Participants**
- Including Children’s National Hospital, Hospital for Sick Children and parent representation

**Committee Roles:**
- Faculty
- Patient, family and community engagement
- Curriculum development and training
- LGBTQ+
- Communication and dissemination
- Data and research
- Non-clinical staff
- Nursing*
- Trainees and students

* The Nursing Advocacy Council, an arm of the Shared Nursing Leadership Council, is the council committed to advancing nursing DEI efforts.
September 25
Racism is a Public Health Crisis
Q&A Conversation, Asif Dhar, M.D., MBA, Vice Chairman and US Life Sciences and Health Care Industry Leader at Deloitte LLP

October 16
Diversity Equity and Inclusion at Children’s National Hospital Updates
Subcommittee Updates: Faculty, Non-Clinical Staff
Personal reflections and sharing from leadership, faculty and staff
Participant Q&A

November 20
Diversity Equity and Inclusion at Children’s National Hospital Updates
Subcommittee Updates: Curriculum, LGBTQ
Personal reflections and sharing from leadership, faculty and staff
Participant Q&A

January 22
Diversity Equity and Inclusion at Children’s National Hospital Updates
DEI goals and the Diversity Engagement Survey
COVID Vaccine Update
Subcommittee Updates: Patient Care Services, Family and Community Engagement
Personal reflections and sharing from leadership, faculty, staff and patient families
Participant Q&A

February 12
Black Men In White Coats Trailer and Panel Discussion
- Justin Burton, M.D., chief, Division of Pediatric Rehabilitation Medicine
- P. Jamil Madati, M.D., medical director, Children’s National ED at United Medical Center
- Tommie L. Robinson Jr., Ph.D., chief, Division of Hearing and Speech
Participant Q&A

March 12
Diversity Equity and Inclusion at Children’s National Hospital Updates
Introducing DEI Dashboard
Subcommittee Updates: Trainees and Students, Communications
Personal reflections and sharing from leadership, faculty, and staff
Participant Q&A

April 9
Anti-Asian and Pacific Islander Violence Reflection from the CEO
Panel Discussion - Maggy Li, program director, Human Resources, Shuo Zhang, accounting supervisor, CNRI and Sean Tan, director, Pharmacy Operations
Participant Q&A

May 14
Diversity Equity and Inclusion at Children’s National Hospital Updates
Bias and DEI Training Reminders for staff
Subcommittee Updates: Data and Research
Participant Q&A

June 11
Pride Month Celebration
Video: Billy Porter Gives a Brief History of Queer Political Action
Presentation: Anti-Trans Healthcare Laws, including an overview of the Youth Pride Clinic: Lawrence D’Angelo, M.D., MPH, clinic director
Personal reflections and sharing from leadership, faculty, and staff
Participant Q&A

December 18
Diversity Equity and Inclusion at Children’s National Hospital Updates
COVID-19 Vaccines Nursing Advisory Council Updates
Personal reflections and sharing from leadership, faculty and staff
Participant Q&A

March 12
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Introducing DEI Dashboard
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While much attention this past year was spent on establishing baselines and a set of measurable goals for the future, the committee and subcommittees have also accomplished many tangible achievements as well. Several programmatic areas made exceptional progress this year, with highlights including the Mentorship Lattice Program, the creation of more supports and programs for LGBTQ+ patients, families and employees and updates of hospital policies, procedures and training.

**Mentorship Lattice Program**

The subcommittees for faculty and for students, residents and fellows overwhelmingly agreed that the hospital needed a formalized mentorship program to foster equitable recruitment, retention and inclusion practices.

To address this need, the Mentorship Lattice Program launched as a pilot in the summer of 2021. Rather than simply building another one-to-one, more traditional mentorship program, the Mentorship Lattice has three core overlapping elements that form a “lattice” of support: community building activities, a professional development series and mentor-mentee dyads.

More than 100 faculty, fellows, residents and students applied for the 10 slots originally proposed for the pilot. Given the unprecedented interest and engagement, the pilot opened up enough spaces to accommodate everyone who expressed interest.
Healthcare Equality Index (HEI) Score

The Human Rights Campaign’s Healthcare Equality Index is a nationally recognized benchmark tool that evaluates the equity and inclusion of a healthcare facility’s policies and practices for both employees and patients. More than 1,700 healthcare facilities across the United States participate in this assessment every year.

The LGBTQ+ subcommittee performed a gap analysis based on the institution’s performance on the 2020 Index to identify areas for improvement. From that data, they developed a plan to start addressing these areas both short- and long-term. In the short term, the team coordinated with hospital departments including Human Resources and Legal to move the needle in several places, including:

- Adding LGBTQ+ explicit language to the hospital’s non-discrimination policy
- Updating the Patient Bill of Rights
- Specifying additional insurance benefits and coverage for transgender healthcare services
- Contributing content to training modules for bias, how to report bias and other diversity topics

The goal is to improve the hospital’s HEI score by 10% when the next scores are released in late 2021. Data gleaned from the gap analysis also played a role in defining priority areas and programs for the longer-term institution-wide intervention framework as well.

Bias policy updates, increased training and reporting

To provide clarity and reaffirm the organization’s commitment to being a safer and more affirming environment for everyone, Human Resources and Child Health Advocacy Institute teams and others at Children’s National worked together to explicitly address bias incidents in the hospital’s Harassment and Discrimination policy. The policy applies to staff, patients and family members and other visitors.

The new policy, now titled Bias Incidents, Harassment & Discrimination, defines bias incidents as actions, words or behaviors that do not promote a culture of inclusivity. The updated policy also provides guidance on how to report these incidents when they occur. The existing Safety Event Reporting System, where employees report safety concerns, also now includes a section for bias incident reporting.

To ensure all employees understand the policy and can appropriately address and report incidents, the hospital also launched the first organization-wide mandatory training for “Bias Incidents and Events.” Additionally, all new employees and managers were required to complete DEI training before the end of the fiscal year as part of annual training requirements.

“Expectations for non-biased behavior includes staff to staff behaviors, but also extends to patients, their family members, and other visitors/members of the Children’s National community.”

— Bias Incidents, Harassment & Discrimination Policy 2021
Data-driven, measurable performance improvement strategies are central to Children’s National Hospital’s approach to improving diversity, equity and inclusion. These strategies draw on successful corporate sector models. The reliance on a robust quality improvement intervention and direct linkages between equity goals and incentive compensation are two of the primary strategies driven by best practices that will be crucial to sustainable momentum.

Data-Driven Goals and Strategic Framework Implementation for Sustainability

Three key priority areas: equitable compensation, bias and discrimination, and availability of advancement opportunities, were identified based on data collected from key resources including the employee baseline assessment and insight from committees as well as dialogue sessions.

The priority areas form the foundation of the institution’s first intervention framework for diversity, equity and inclusion. The intervention plan directs committee and subcommittee programmatic focus and emphasizes measurable progress. Several intervention tactics for each framework priority have already progressed in the initial year, and will continue in the upcoming year including:

- **Equitable compensation**
  - Initial faculty equity analysis
  - Implementation of some equity-based salary adjustments
  - New communication tools to share information about compensation philosophy and benchmarks, including a dedicated site on the employee Intranet

- **Bias and discrimination**
  - Launch of a bias reporting module within the hospital’s existing Safety Reporting System
  - Modification of the institution’s Harassment and Discrimination policy to explicitly include and address bias
  - Creation of a hands-on review and follow up process that is integrated into established Quality and Safety processes and ensures reports are investigated, recurrent themes are identified and issues are addressed with plans for closed loop communication

- **Availability of advancement opportunities for both clinical and non-clinical staff**
  - Launch of the clinical Mentorship Lattice Program for medical students, residents, fellows and faculty, with plans for launch of a non-clinical mentorship program in 2022
  - Better communication about career development opportunities for non-clinical staff through a new employee intranet site

Future goals and programmatic direction will be determined by progress made in the prior year. Success is measured through tracked improvements to the hospital’s established baseline indicators, which include key questions drawn from the employee survey, validation and resolution of bias report and improvement in the organization’s HEI score.
Equity-Focused Institutional Goals  
Lock-In Accountability

The tremendous strides in 2021 and the ongoing institutional priority have set the stage for another diversity, equity and inclusion-focused incentive goal in fiscal year 2022. This goal, recently approved by the Children’s National Board of Directors, reaffirms the organization’s commitment to this initiative and solidifies its focus for the coming year.

The FY22 Institutional Goal for Diversity, Equity and Inclusion seeks to ensure an “equity lens” in clinical practice during the first implementation year of the intervention framework. The goal calls upon leaders to develop clinical processes and tools to make sure that inclusion and racial equity considerations are embedded in clinical care. In the upcoming year, metrics for success will include work to enhance demographic tracking and reporting as well as the development and planning of quality improvement interventions for identified root causes of health disparities and health care delivery inequities identified by data analysis.

Planting the Seeds for Long Term Diversity, Equity and Inclusion at Children’s National Hospital

There are many reasons that Children’s National stood ready to launch a robust set of initiatives focused on diversity, equity and inclusion in the summer of 2020. Our history of leading the charge to empower those who have been historically underrepresented in medicine, our established frameworks of data-driven, evidence-based health care delivery, the hard work, commitment and dedication of committee members and the unwavering support of our hospital leadership, including the board of directors and president and CEO, are just four of the biggest factors that have made it possible for the organization to launch these programs and achieve change in a relatively short time period.

The accomplishments outlined in this report only represent the start of our journey, which, in this initial year focused predominantly on our own internal systems and employees. In the upcoming year, our focus will expand to measure, document and address any inequities in delivery of care to our patients.

Though much work remains ahead, the Diversity, Equity and Inclusion Program’s Committees in collaboration with other leaders and staff, have planted the foundational seeds. We aim to sustain and expand the scope of our DEI work to ensure excellence and equity in clinical care for all the patients we serve.

“So we temper our joy with realism, we bathe our sense of progress with yesterday’s silent tears and our optimism with today’s prayers for our people.”

— Denice Cora-Bramble, M.D., MBA. Remarks following conviction of Derek Chauvin for George Floyd’s murder
"Our ability to reach unity in diversity will be the beauty and the test of our civilization."
— Mahatma Ghandi