



Health Equity Resource Series

Diversity and Inclusion in Leadership and Governance



Executive Summary

The COVID-19 pandemic's disproportionate impact on people of color has accelerated the integration of health equity into health care strategy playbooks across the nation. Within health care settings, from urban to rural and from hospitals to ambulatory care sites and clinics, there is renewed focus on efforts to advance health equity. Furthermore, there is growing recognition that a commitment to promoting equitable practices is tied to the core work of improving quality and patient safety.

Background on IFDHE Toolkit Series

To support hospitals and health systems starting from different points on their journey to achieve health equity, the AHA's Institute for Diversity and Health Equity (IFDHE) is releasing a series of toolkits to share evidence-based practices to inform organizational next steps for the following topics:

- [Data collection, validation, stratification and application of patient information to address disparate outcomes](#)
- [Cultural humility and implicit bias training and education](#)
- Diversity and inclusion in leadership and governance roles
- Sustainable community partnerships focused on improving equity

Each toolkit is designed to be informative, regardless of whether organizations have already deployed health equity tactics and strategies or if they are in the early stages of implementation. Each helps lay the groundwork for an in-development equity roadmap to support hospitals' and health systems' efforts toward achieving high-quality, equitable care for all.

This toolkit focuses on developing diversity and inclusion leadership strategies at the board level. It also encourages significant governance changes throughout health care organizations.

Who should be involved in this work?

Interdisciplinary teams that are organized to coordinate efforts across departments to focus on diversity and inclusion initiatives – reflecting the direction of leadership and governance measures – should use these toolkits. Strong support from the senior leadership positions indicated below is essential to encourage and reinforce actions by teams involved in the ongoing work. Titles may vary by hospitals and health systems.

Examples of Senior Leadership

- Chief Executive Officer
- Chief Operating Officer
- Chief Finance Officer
- Chief Medical Officer
- Chief Nursing Officer
- Chief Health Equity Officer
- Chief Diversity and Inclusion Officer
- Chief Population Health Officer
- Chief Compliance Officer
- Patient and Family Advisory Council
- Chief Clinical Information Officer
- Chief Quality Officer
- Patient Experience Officer
- Patient Services Lead
- Chief Information Officer

How these toolkits can be used

Recognizing there is no predetermined starting point, these toolkits are designed to meet organizations where they currently stand. Initial processes may include:

- Establishing your organization's baseline experience;
- Focusing on one or two key areas to drive change; and
- Tracking progress over time

Examples of leading practices from hospitals and health systems across the nation are used to inspire and motivate other organizations implementing similar initiatives that impact communities so that *all people can reach their highest potential for health — this is the AHA's vision for health equity.*

Understanding the issue

Due to the ongoing disproportionate impact of COVID-19 on structurally or historically marginalized communities, many hospital and health system leaders are renewing their commitment to promote racial justice and eliminate various forms of bias. To address health inequities and practice cultural humility, hospitals and health systems must commit to increasing diversity and inclusion in the board room. Support from organization leaders and governing bodies is imperative in carrying out successful and sustainable diversity and inclusion initiatives. Increasing board diversity and promoting noticeable representation are critical steps to enabling better decision-making; such decisions help deliver better health outcomes for each hospital's patients and the communities they serve.



There are many advantages for health care organizations that prioritize diversity and inclusion on their board of directors. Trustees who appreciate and empathize with their patient population needs offer greater insight and the ability to make culturally and emotionally intelligent decisions. Increased board diversity also promotes robust and authentic conversations among different groups. This strategy often results in broader awareness of current issues and sensitivity toward communities served. In having these important discussions, boards may help their organizations avoid unintended consequences when implementing programs or policies.

To uncover growth opportunities, it is important to first identify where health care governance currently stands. AHA's 2019 [National Health Care Governance Survey Report](#) provides insight into progress made in this area, while shedding light on opportunities for continued growth. This survey's data indicate that hospital boards have seen an overall increase in ethnic and racial diversity; in 2018, 58% of respondents reported that their board included at least one member from a community of color, an increase from 53% in 2014. For 2018, health system boards reported the highest level of diverse representation (17%), compared with system subsidiary hospital boards (13%) and freestanding hospitals (9%).

Diversity and Inclusion Development Guidance

- **5 Steps to Achieving Diversity on Your Board** (<https://trustees.aha.org/key-steps-achieving-diversity-health-care-governing-board>) This resource provides five foundational steps to achieving diversity within hospital boards. This one-step-at-a-time approach makes the journey leading to a diverse and inclusive organization both achievable and sustainable.
- **The Thing About Diversity Is...** (<https://trustees.aha.org/thing-about-diversity>) Governing boards ready to take action to improve their diversity may run into common misconceptions about board composition. This resource addresses those misconceptions that impact and derail diversity and inclusion efforts. It also provides actionable steps and key questions for board members ready to engage in the process.
- **How and Why to Increase Board Diversity** (<https://trustees.aha.org/articles/916-how-and-why-to-increase-board-diversity>) This article makes the case for the importance of building diverse boards. It includes discussion questions for administrators and examples culled from Main Line Health, Christus Health and Saddleback Memorial Medical Center.

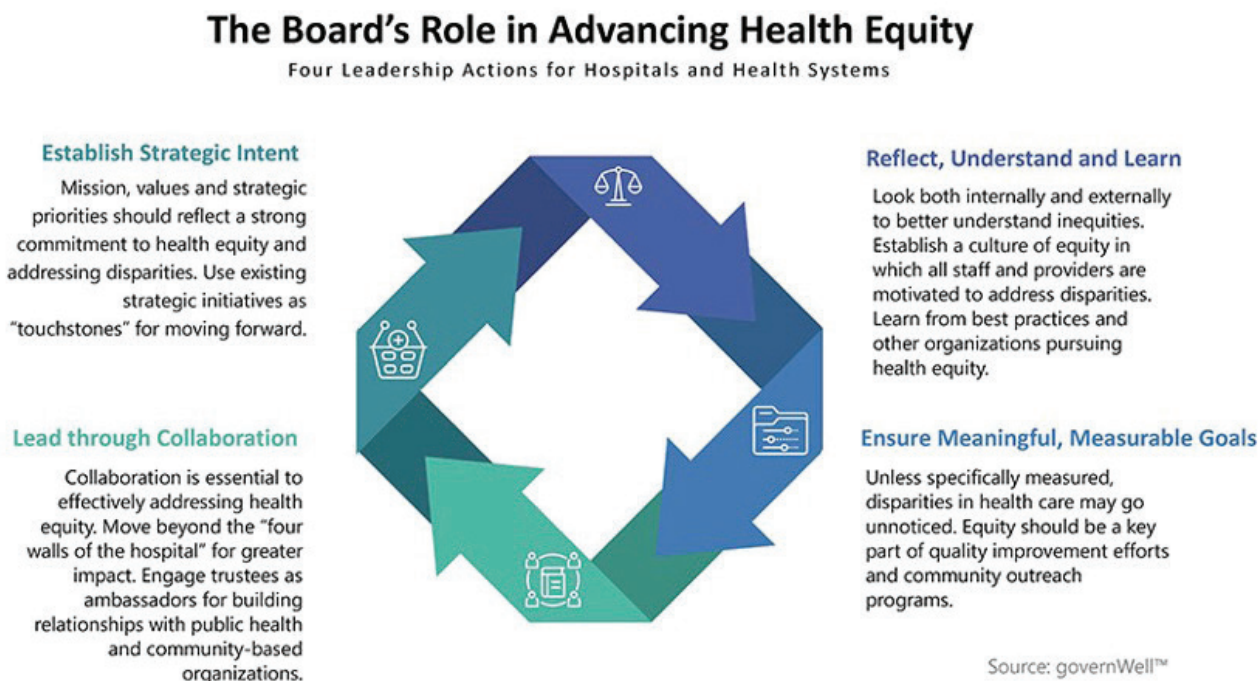
Board involvement in advancing health equity

The role of boards in promoting health equity is vital to establishing policies and standards that can cascade throughout all levels of health care organizations. Board members help build strategies for moving forward while prioritizing, monitoring and collaborating on specific steps to achieve health equity. Through strategic initiatives and strong community partnerships, boards may become more attuned to the needs of the patient populations their hospitals serve, which has the potential to catalyze interventions that improve long-term community health.

Health Equity Resources for Trustees

- **Addressing Health Equity in the Hospital Board Room** (<https://trustees.aha.org/addressing-health-equity-hospital-board-room>) This article provides a foundation upon which boards can strengthen their approach to health equity, with examples of how hospitals are addressing disparities during the COVID-19 pandemic and discussion questions.
- **The Board's Role in Advancing Healthier, More Equitable Communities** (<https://trustees.aha.org/boards-role-advancing-healthier-more-equitable-communities>) The strategies in this piece focus on strengthening health equity initiatives to benefit communities, along with the critical role performed by boards in these efforts. It provides questions for boards to consider as well as useful tips on stakeholder collaborations.

Getting Started



Establish Strategic Intent

Boards play a critical role in ensuring that health inequities within their communities are addressed through actions, with metrics established to measure progress. Experts recommend standard reviews and updates for community health needs assessments (CHNAs). For example, the Affordable Care Act (ACA) requires not-for-profit hospitals to conduct CHNAs every three years. Tools such as the [County Health Rankings and Roadmaps](#) may assist in understanding the unique disparities present in the communities served by hospitals or health systems. **Efforts to address health equity are unlikely to succeed if they are not part of a broader culture of equity.**

Community Engagement

Before a health care organization becomes proficient in cultural humility, leaders must understand the communities they serve and the role the organization plays within those communities. In addition to the roles listed in the Examples of Senior Leadership table of interdisciplinary team members to support this effort, engaging with patients and the communities served is essential for this work to be successful. A major principle of cultural humility involves working in conjunction with natural, informal or formal partnerships with patients and communities and incorporating their voices.

Reflect, Understand and Learn

Boards must establish, in tandem with strategic intent, a culture of equity which exists within and outside of the board room. Stakeholders can be kept engaged and inspired through the implementation of trainings and discussions that revolve around evidence-informed practices, along with connections to organizations that have demonstrated success.

Ensure Meaningful, Measurable Goals

Metrics and assessment tools should be deployed to ensure strategic plans are implemented and followed. [Data collection](#) and analysis enable the uncovering of health care inequities that may not be apparent on the surface. For example, barriers that hinder patients' abilities to receive quality care and achieve greater health — such as food insecurities or transportation access — may not be known unless identified through data collection. Such details allow board members to make better-informed decisions.

Lead Through Collaboration

Establishing relationships with community partners and collaborations that reach beyond hospital or health system walls have the potential to create valuable connections and build trust within communities that will benefit residents. Hospitals might consider taking on the role of convener. This will enable the joining of traditional and non-traditional community stakeholders for the purpose of designing strategies to improve community health. Board members should be encouraged to review assessment tools and case studies. For example this [diversity and cultural proficiency assessment tool resource](#) from AHA maps out the benefits of strong community connections.

Additionally, boards may wish to reflect on the following discussion topics and initial steps for promoting board diversity:

- The board openly discusses topics related to diversity, inclusion and health equity;
- The CEO and board set diversity goals within the strategic plan;
- The achievement of diversity goals is linked to executive compensation; and
- The CEO and board internally and externally communicate their commitment to diversity and inclusion.

It helps to think of the approach to broadening board-level diversity and inclusion as a gradual journey toward a brighter future, rather than a sudden, overwhelming plunge. The benefits of board diversity, including improved community reputation and increased financial performance, outweigh the potential challenges — delivering a more focused approach on advancing health equity and eliminating health care disparities.

“What is a culture of equity?”

“Cultural equity embodies the values, policies, and practices that ensure that all people — including but not limited to those who have been historically underrepresented based on race/ethnicity, age, disability, sexual orientation, gender, gender identity, socioeconomic status, geography, citizenship status, or religion — are represented in the development of arts policy; the support of artists; the nurturing of accessible, thriving venues for expression; and the fair distribution of programmatic, financial, and informational resources.”

— Americans for the Arts

Sources for Finding Candidates of Diverse Backgrounds

According to [AHA's 2019 Governance Survey Report](#), survey respondents reported that African Americans and Hispanics represented 6% and 3%, respectively, of voting board members. There are national, state and local organizations dedicated to advancing diverse leadership in the boardroom. Here is a short list to get you started:

- African American Board Leadership Institute
 - Executive Leadership Council
 - Latino Corporate Directors Association
 - National Association of Asian American Professionals
 - National Association of Health Services Executives
 - National Association of Latino Healthcare Executives
 - Society for the Advancement of Chicanos/Hispanics and Native Americans in Science
- **Recruiting for a Diverse Health Care Board** (<https://trustees.aha.org/recruiting-diverse-health-care-board>) This article features best practices, processes and a sample board demographic/attribute profile matrix for recruiting diverse board members who better reflect community diversity.
 - **AHA Trustee Match Program** (<https://www.aha.org/trustee-match-program>) The AHA formed a strategic alliance with the National Urban League and UnidosUS to match local affiliate executives to AHA member CEOs and governance leaders with the goal of placing these leaders on governance boards of AHA member hospitals and health systems.



Assessments

- **Strategies for Leadership: Does your hospital reflect the community it serves? A Diversity and Cultural Proficiency Assessment Tool for Leaders** (<https://www.aha.org/system/files/2018-02/DiversityTool.pdf>) This four-part tool for leaders includes an assessment checklist, suggested action steps, case studies and a bibliography of resources to build cultural proficiency and board diversity.

Application Case Studies: Leadership

- **Patient and Family Engagement Resource Compendium** (<https://www.aha.org/news/insights-and-analysis/2018-09-11-penn-medicine-develops-first-its-kind-framework-measuring>) The analysis included in this resource highlights Penn Medicine's "first-of-its-kind" efforts to establish a framework for workforce inclusion.
- **Best Practices for Building Leadership Diversity Programs** (<https://ifdhe.aha.org/system/files/media/file/2020/08/best-practices-for-building-leadership-diversity-programs.pdf>). This guide features case studies from hospitals and health systems that were honored with AHA's Carolyn Boone Lewis Equity of Care Award. It includes promising practices, such as mentoring programs and the formation of educational groups and committees.
- **Local Hiring Building the Pipeline to a Healthy Community Webinar** (<https://www.healthycommunities.org/inclusive-local-hiring-building-pipeline-healthy-community>) This webinar features resources for health systems looking to strengthen inclusive, local hiring by broadening external community connections and internal career paths.

Application Case Studies: Governance

- **Henry Ford Health System Board Essential for Diversity** (<https://trustees.aha.org/articles/1300-henry-ford-health-system-board-essential-for-diversity>). This blog describes how Henry Ford Health System's executive diversity recruitment committee helps the organization stay committed to improving its talent pipeline, talent development practices, supplier diversity and other actions essential to an inclusive culture.

- **Tackling Health Equity: A Two-Part Podcast for Trustees** (<https://trustees.aha.org/tackling-health-equity-how-boards-can-do-it>). Maria Hernandez, Ph.D., president and chief operating officer of Impact4Health, and Karma Bass, senior principal at Via Healthcare Consulting, discuss the health equity challenges that board members can expect to encounter and how best to tackle them.

Conclusion

Addressing diversity and inclusion within and beyond the board room requires focused, dedicated effort and time. Although each hospital and health system is at a different point on their journey to advance health equity, overall goals should include a leadership and governance team composed of individuals who reflect the culture and diverse background of the communities served. Better decisions and inclusive policies are the product of a greater understanding of patients' perceptions of care and the circumstances in which they live. By promoting diversity in board leadership, such policies can filter through an entire health care organization. Furthermore, by taking critical steps to increase diversity and inclusion on governance boards, health care organizations can accelerate advancements in eliminating health disparities, resulting in better health outcomes for patients and communities.

Leadership Discussion Guide

1. How is a commitment to inclusion reflected in our mission, values and strategic priorities?
2. How is the diversity of the community served reflected within the management team?
3. Has our management team met with community leaders to seek their advice on how to work together to co-design health equity solutions?
4. Do we have an education and training strategy on health equity, diversity and inclusion?
5. What does diversity mean to our team, board and organization?

NOTES: _____



Board Discussion Guide

1. What should our board strategy for diversity and inclusion be? Who will serve as champions?
2. Should we develop a diversity and inclusion committee or include these issues within existing committees?
3. How can inclusion and belonging be incorporated into our overall strategic plan?
4. How will we assess progress on diversity and inclusion initiatives? What accountability measures will be in place?
5. Does our board's membership currently reflect the communities our organization serves?

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Trustee, Governing Guidance

A Trustee's Guide to Population Health: Building New Foundations Linking Care (<https://trustees.aha.org/trustees-guide-population-health-building-new-foundations-linking-care-community>). The videos included in this resource are designed to provide trustees with an overview of population health strategies, the foundational capabilities that health care leaders are using to redesign care, the importance of developing new partnerships, as well as specific actions for how trustees can participate with their organization's leadership team to advance health within their community.

Governing Board's Role in Health Equity and Diversity (<https://www.aha.org/discussion-questions-templates/2020-12-02-governing-boards-role-health-equity-and-diversity>) This template provides discussion guide questions for trustees who seek to address health equity, diversity and inclusion. It highlights the importance of internal champions and cultural humility.

How to Grow the Amount of Women on Hospital Boards (<https://trustees.aha.org/articles/1030-how-to-grow-the-amount-of-women-on-hospital-boards>). Despite being on the front lines of health care, women are often underrepresented where decisions influencing care are made – in hospital board rooms. This article captures the importance of gender diversity on hospital and health system boards.

The Bluford Healthcare Leadership Institute (<https://www.blufordinstitute.org/>). The Bluford Healthcare Leadership Institute is a professional development program with a mission to eliminate health disparities among underrepresented communities by creating a pipeline of culturally intelligent, diverse future health care leaders.

Institute for Diversity and Health Equity Enrichment Programs (<https://ifdhe.aha.org/summer-enrichment-program-overview>). Established in 1994, the Summer Enrichment Program (SEP) places graduate students from diverse backgrounds in hospitals and health systems across the country for a 10 week paid internship. The Fall Enrichment Program is an extended version of the SEP lasting up to 20 weeks.

American Hospital Association 2019 National Health Care Governance Survey Report (https://trustees.aha.org/system/files/media/file/2019/06/aha-2019-governance-survey-report_v8-final.pdf). The 2019 National Health Care Governance Survey provides an in-depth view of health care organization board composition, structure, support and board practice.